

AMENDED IN ASSEMBLY AUGUST 20, 2012

AMENDED IN ASSEMBLY JUNE 18, 2012

AMENDED IN SENATE APRIL 17, 2012

**SENATE BILL**

**No. 1236**

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**Introduced by Senator Price**

February 23, 2012

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An act to amend Sections 800, 801.01, 802.1, 802.5, 803, 803.1, 803.5, 803.6, 805, 2006, 2335, 2450.3, 2460, 2465, 2470, 2472, 2475, 2477, 2484, 2493, 2496, 2497.5, 2602, 2607.5, 2920, 2933, 3501, 3502, 3502.1, 3502.3, 3502.5, 3504, 3504.1, 3505, 3506, 3507, 3508, 3509, 3509.5, 3510, 3511, 3512, 3513, 3514.1, 3516, 3516.5, 3517, 3518, 3519, 3519.5, 3520, 3521, 3521.1, 3521.2, 3521.5, 3522, 3523, 3524, 3524.5, 3526, 3527, 3529, 3530, 3531, 3533, 3534, 3534.1, 3534.2, 3534.3, 3534.4, 3534.5, 3534.6, 3534.7, 3534.9, 3534.10, 3535, 3537.10, 3537.20, 3537.30, 3537.50, 3540, 3546, 4001, 4003, 4990, 4990.04, 8000, 8005, 8027, 8030.2, 8030.5, 9812.5, 9830.5, 9832.5, 9847.5, 9849, 9851, 9853, 9860, 9862.5, 9863, and 9873, of, and to add Section 3521.3 to, the Business and Professions Code, and to amend Sections 12529, 12529.5, and 12529.6 of the Government Code, relating to ~~healing arts professions and vocations~~, and making an appropriation therefor.

LEGISLATIVE COUNSEL'S DIGEST

SB 1236, as amended, Price. ~~Healing arts boards. Professions and vocations.~~

(1) Existing law, until January 1, 2013, declares that using a vertical enforcement and prosecution model for the Medical Board of California's investigations is in the best interests of the people of

*California. Under existing law, a vertical enforcement and prosecution model is described as the joint assignment of a complaint to a board investigator and to a deputy attorney general responsible for prosecuting the case if the investigation results in the filing of an accusation. Existing law requires the board to, among other things, establish and implement a plan to locate specified staff in the same offices in order to carry out the intent of the vertical enforcement and prosecution model.*

*This bill would extend the operation of these provisions to January 1, 2014, and would also make a conforming change in that regard.*

(1)

(2) Existing law provides for the certification and regulation of podiatrists by the California Board of Podiatric Medicine within the jurisdiction of the Medical Board of California. Under existing law, the California Board of Podiatric Medicine will be repealed on January 1, 2013. Existing law requires that boards scheduled for repeal be reviewed by the Joint Sunset Review Committee of the Legislature.

This bill would extend the operation of the California Board of Podiatric Medicine until January 1, 2017. The bill would specify that the board is subject to review by the appropriate policy committees of the Legislature. The bill would revise provisions regarding the examination of applicants for certification to practice podiatric medicine.

(2)

(3) Existing law establishes the Physician Assistant Committee within the jurisdiction of the Medical Board of California and provides for its membership, operation, duties, and powers with respect to licensure and regulation of physician assistants, including requirements for the payment of license renewal fees. Under existing law, the committee will be repealed on January 1, 2013.

This bill would rename the committee as the Physician Assistant Board, make various conforming changes relative to this change in designation, and extend the operation of the board until January 1, 2017. The bill would revise the composition of the board and would specify that the board is subject to review by the appropriate policy committees of the Legislature. The bill would allow the board to establish, by regulation, a system for placement of a licensee on retired status, as specified.

(3)

(4) Existing law specifies reports to be made and procedures to be followed when a coroner receives information, as specified, that a death may be the result of a physician and surgeon's, or podiatrist's gross

negligence or incompetence, and in connection with disciplinary actions against those licensees.

This bill would expand those provisions to include conduct of a physician assistant.

(4)

(5) Existing law requires a physician and surgeon, osteopathic physician and surgeon, and a doctor of podiatric medicine to report to his or her licensing board the occurrence of an indictment or information charging a felony against the licensee or the conviction of the licensee of a felony or misdemeanor. Under existing law the failure of those licensees to submit the required report is a crime.

This bill would impose that requirement on a physician assistant. Because a violation of this requirement by a physician assistant would be a crime, this bill would impose a state-mandated local program.

(6) *Existing law, the Physical Therapy Practice Act, provides for the licensure and regulation of physical therapists by the Physical Therapy Board of California. Existing law authorizes the board to appoint an executive officer. Existing law makes these provisions inoperative on July 1, 2013, and repealed on January 1, 2014. Under existing law, boards scheduled for repeal are required to be evaluated by the Joint Sunset Review Committee.*

*This bill would delete the inoperative date and would instead repeal these provisions on January 1, 2014. The bill would also specify that this board would be subject to review by the appropriate policy committees of the Legislature.*

(7) *Existing law, the Naturopathic Doctors Act, provides for the licensure and regulation of naturopathic doctors by the Naturopathic Medicine Committee within the Osteopathic Medical Board of California. Existing law repeals these provisions on January 1, 2014. Under existing law, boards scheduled for repeal are required to be evaluated by the Joint Sunset Review Committee.*

*This bill would make a conforming change with regard to the operation of these provisions until January 1, 2014, and the bill would also specify that this board would be subject to review by the appropriate policy committees of the Legislature.*

(8) *Existing law, the Pharmacy Law, provides for the licensure and regulation of pharmacies, pharmacists, pharmacy technicians, wholesalers of dangerous drugs or devices, and others by the California State Board of Pharmacy. Existing law authorizes the board to appoint an executive officer. Under existing law, the board and its authority to*

*appoint an executive officer will be repealed on January 1, 2013. Under existing law, boards scheduled for repeal are required to be evaluated by the Joint Sunset Review Committee.*

*This bill would extend the operation of the California State Board of Pharmacy and its authority to appoint an executive officer until January 1, 2017, and would specify that the board is subject to review by the appropriate policy committees of the Legislature.*

*(9) Existing law provides for the licensure and regulation of psychologists by the Board of Psychology. Existing law provides for the licensure and regulation of licensed educational psychologists, clinical social workers, marriage and family therapists, and licensed professional clinical counselors by the Board of Behavioral Sciences within the Department of Consumer Affairs. Existing law specifies the composition of each board and requires or authorizes each board to employ an executive officer. Existing law repeals these provisions on January 1, 2013. Under existing law, boards scheduled for repeal are required to be evaluated by the Joint Sunset Review Committee.*

*This bill would extend the operation of these provisions until January 1, 2017. This bill would specify that each board is subject to review by the appropriate policy committees of the Legislature.*

*(10) Existing law provides for the licensure and regulation of court reporters by the Court Reporters Board of California within the Department of Consumer Affairs. Existing law authorizes this board to appoint an executive officer and committees as necessary. Existing law repeals these provisions on January 1, 2013.*

*This bill would extend the operation of these provisions until January 1, 2017, and would specify that the board is subject to review by the appropriate policy committees of the Legislature.*

*Existing law requires, until January 1, 2013, certain fees and revenues collected by the board to be deposited into the Transcript Reimbursement Fund to be available to provide reimbursement for the cost of providing shorthand reporting services to low-income litigants in civil cases. Existing law authorizes, until January 1, 2013, low-income persons appearing pro se to apply for funds from the Transcript Reimbursement Fund, subject to specified requirements and limitations. Existing law requires the board, until January 1, 2013, to publicize the availability of the fund to prospective applicants. Existing law requires the unencumbered funds remaining in the Transcript Reimbursement Fund as of January 1, 2013, to be transferred to the Court Reporters' Fund.*

*This bill would extend the operation of these provisions until January 1, 2017, and would make a technical change to these provisions. By extending the operation of the Transcript Reimbursement Fund, which is a continuously appropriated fund, the bill would make an appropriation.*

*(11) Existing law, the Electronic and Appliance Repair Dealer Registration Law, provides for the registration and regulation of electronic and appliance service dealers and service contractors by the Bureau of Electronic and Appliance Repair, Home Furnishings, and Thermal Insulation within the Department of Consumer Affairs and makes a failure to comply with its provisions a crime. Existing law, until January 1, 2013, requires a service contractor to pay specified fees to the bureau, including a registration fee and a registration renewal fee. Existing law, until January 1, 2013, requires the Director of Consumer Affairs to gather evidence of violations of the Electronic and Appliance Repair Dealer Registration Law, and any of its regulations, by a service contractor or by any employee, partner, officer, or member of any service contractor. Existing law, until January 1, 2013, requires a service contractor to maintain specified records to be open for inspection by the director and other law enforcement officials. Existing law, until January 1, 2013, also provides for the revocation of the registration of a service contractor by the director and for the superior court to issue a restraining order or injunction against a service contractor who violates these provisions.*

*This bill would extend the operation of these and other related provisions to January 1, 2015. By extending the operation of certain of these provisions, the violation of which is a crime, this bill would impose a state-mandated local program.*

*(12) Existing law, until January 1, 2013, establishes the Health Quality Enforcement Section within the Department of Justice for the purpose of investigating and prosecuting proceedings against licensees and applicants within the jurisdiction of the Medical Board of California, the California Board of Podiatric Medicine, the Board of Psychology, or any committee under the jurisdiction of the Medical Board of California. Existing law, until January 1, 2013, requires all complaints against licensees of these boards to be made available to the Health Quality Enforcement Section.*

*This bill would extend the operation of these provisions until January 1, 2014.*

(13) The California Constitution requires the state to reimburse local agencies and school districts for certain costs mandated by the state. Statutory provisions establish procedures for making that reimbursement.

This bill would provide that no reimbursement is required by this act for a specified reason.

Vote: majority. Appropriation: ~~no~~-yes. Fiscal committee: yes. State-mandated local program: yes.

*The people of the State of California do enact as follows:*

1 SECTION 1. Section 800 of the Business and Professions Code  
2 is amended to read:

3 800. (a) The Medical Board of California, the Board of  
4 Psychology, the Dental Board of California, the Osteopathic  
5 Medical Board of California, the State Board of Chiropractic  
6 Examiners, the Board of Registered Nursing, the Board of  
7 Vocational Nursing and Psychiatric Technicians, the State Board  
8 of Optometry, the Veterinary Medical Board, the Board of  
9 Behavioral Sciences, the Physical Therapy Board of California,  
10 the California State Board of Pharmacy, the Speech-Language  
11 Pathology and Audiology and Hearing Aid Dispensers Board, the  
12 California Board of Occupational Therapy, the Acupuncture Board,  
13 and the Physician Assistant Board shall each separately create and  
14 maintain a central file of the names of all persons who hold a  
15 license, certificate, or similar authority from that board. Each  
16 central file shall be created and maintained to provide an individual  
17 historical record for each licensee with respect to the following  
18 information:

19 (1) Any conviction of a crime in this or any other state that  
20 constitutes unprofessional conduct pursuant to the reporting  
21 requirements of Section 803.

22 (2) Any judgment or settlement requiring the licensee or his or  
23 her insurer to pay any amount of damages in excess of three  
24 thousand dollars (\$3,000) for any claim that injury or death was  
25 proximately caused by the licensee's negligence, error or omission  
26 in practice, or by rendering unauthorized professional services,  
27 pursuant to the reporting requirements of Section 801 or 802.

28 (3) Any public complaints for which provision is made pursuant  
29 to subdivision (b).

(4) Disciplinary information reported pursuant to Section 805, including any additional exculpatory or explanatory statements submitted by the licensee pursuant to subdivision (f) of Section 805. If a court finds, in a final judgment, that the peer review resulting in the 805 report was conducted in bad faith and the licensee who is the subject of the report notifies the board of that finding, the board shall include that finding in the central file. For purposes of this paragraph, “peer review” has the same meaning as defined in Section 805.

(5) Information reported pursuant to Section 805.01, including any explanatory or exculpatory information submitted by the licensee pursuant to subdivision (b) of that section.

(b) Each board shall prescribe and promulgate forms on which members of the public and other licensees or certificate holders may file written complaints to the board alleging any act of misconduct in, or connected with, the performance of professional services by the licensee.

If a board, or division thereof, a committee, or a panel has failed to act upon a complaint or report within five years, or has found that the complaint or report is without merit, the central file shall be purged of information relating to the complaint or report.

Notwithstanding this subdivision, the Board of Psychology, the Board of Behavioral Sciences, and the Respiratory Care Board of California shall maintain complaints or reports as long as each board deems necessary.

(c) The contents of any central file that are not public records under any other provision of law shall be confidential except that the licensee involved, or his or her counsel or representative, shall have the right to inspect and have copies made of his or her complete file except for the provision that may disclose the identity of an information source. For the purposes of this section, a board may protect an information source by providing a copy of the material with only those deletions necessary to protect the identity of the source or by providing a comprehensive summary of the substance of the material. Whichever method is used, the board shall ensure that full disclosure is made to the subject of any personal information that could reasonably in any way reflect or convey anything detrimental, disparaging, or threatening to a licensee’s reputation, rights, benefits, privileges, or qualifications, or be used by a board to make a determination that would affect

1 a licensee's rights, benefits, privileges, or qualifications. The  
2 information required to be disclosed pursuant to Section 803.1  
3 shall not be considered among the contents of a central file for the  
4 purposes of this subdivision.

5 The licensee may, but is not required to, submit any additional  
6 exculpatory or explanatory statement or other information that the  
7 board shall include in the central file.

8 Each board may permit any law enforcement or regulatory  
9 agency when required for an investigation of unlawful activity or  
10 for licensing, certification, or regulatory purposes to inspect and  
11 have copies made of that licensee's file, unless the disclosure is  
12 otherwise prohibited by law.

13 These disclosures shall effect no change in the confidential status  
14 of these records.

15 SEC. 2. Section 801.01 of the Business and Professions Code  
16 is amended to read:

17 801.01. The Legislature finds and declares that the filing of  
18 reports with the applicable state agencies required under this  
19 section is essential for the protection of the public. It is the intent  
20 of the Legislature that the reporting requirements set forth in this  
21 section be interpreted broadly in order to expand reporting  
22 obligations.

23 (a) A complete report shall be sent to the Medical Board of  
24 California, the Osteopathic Medical Board of California, the  
25 California Board of Podiatric Medicine, or the Physician Assistant  
26 Board with respect to a licensee of the board as to the following:

27 (1) A settlement over thirty thousand dollars (\$30,000) or  
28 arbitration award of any amount or a civil judgment of any amount,  
29 whether or not vacated by a settlement after entry of the judgment,  
30 that was not reversed on appeal, of a claim or action for damages  
31 for death or personal injury caused by the licensee's alleged  
32 negligence, error, or omission in practice, or by his or her rendering  
33 of unauthorized professional services.

34 (2) A settlement over thirty thousand dollars (\$30,000), if the  
35 settlement is based on the licensee's alleged negligence, error, or  
36 omission in practice, or on the licensee's rendering of unauthorized  
37 professional services, and a party to the settlement is a corporation,  
38 medical group, partnership, or other corporate entity in which the  
39 licensee has an ownership interest or that employs or contracts  
40 with the licensee.

1 (b) The report shall be sent by the following:

2 (1) The insurer providing professional liability insurance to the  
3 licensee.

4 (2) The licensee, or his or her counsel, if the licensee does not  
5 possess professional liability insurance.

6 (3) A state or local governmental agency that self-insures the  
7 licensee. For purposes of this section, “state governmental agency”  
8 includes, but is not limited to, the University of California.

9 (c) The entity, person, or licensee obligated to report pursuant  
10 to subdivision (b) shall send the complete report if the judgment,  
11 settlement agreement, or arbitration award is entered against or  
12 paid by the employer of the licensee and not entered against or  
13 paid by the licensee. “Employer,” as used in this paragraph, means  
14 a professional corporation, a group practice, a health care facility  
15 or clinic licensed or exempt from licensure under the Health and  
16 Safety Code, a licensed health care service plan, a medical care  
17 foundation, an educational institution, a professional institution,  
18 a professional school or college, a general law corporation, a public  
19 entity, or a nonprofit organization that employs, retains, or contracts  
20 with a licensee referred to in this section. Nothing in this paragraph  
21 shall be construed to authorize the employment of, or contracting  
22 with, any licensee in violation of Section 2400.

23 (d) The report shall be sent to the Medical Board of California,  
24 the Osteopathic Medical Board of California, the California Board  
25 of Podiatric Medicine, or the Physician Assistant Board as  
26 appropriate, within 30 days after the written settlement agreement  
27 has been reduced to writing and signed by all parties thereto, within  
28 30 days after service of the arbitration award on the parties, or  
29 within 30 days after the date of entry of the civil judgment.

30 (e) The entity, person, or licensee required to report under  
31 subdivision (b) shall notify the claimant or his or her counsel, if  
32 he or she is represented by counsel, that the report has been sent  
33 to the Medical Board of California, the Osteopathic Medical Board  
34 of California, the California Board of Podiatric Medicine, or the  
35 Physician Assistant Board. If the claimant or his or her counsel  
36 has not received this notice within 45 days after the settlement was  
37 reduced to writing and signed by all of the parties or the arbitration  
38 award was served on the parties or the date of entry of the civil  
39 judgment, the claimant or the claimant’s counsel shall make the  
40 report to the appropriate board.

1 (f) Failure to substantially comply with this section is a public  
2 offense punishable by a fine of not less than five hundred dollars  
3 (\$500) and not more than five thousand dollars (\$5,000).

4 (g) (1) The Medical Board of California, the Osteopathic  
5 Medical Board of California, the California Board of Podiatric  
6 Medicine, and the Physician Assistant Board may develop a  
7 prescribed form for the report.

8 (2) The report shall be deemed complete only if it includes the  
9 following information:

10 (A) The name and last known business and residential addresses  
11 of every plaintiff or claimant involved in the matter, whether or  
12 not the person received an award under the settlement, arbitration,  
13 or judgment.

14 (B) The name and last known business and residential addresses  
15 of every licensee who was alleged to have acted improperly,  
16 whether or not that person was a named defendant in the action  
17 and whether or not that person was required to pay any damages  
18 pursuant to the settlement, arbitration award, or judgment.

19 (C) The name, address, and principal place of business of every  
20 insurer providing professional liability insurance to any person  
21 described in subparagraph (B), and the insured's policy number.

22 (D) The name of the court in which the action or any part of the  
23 action was filed, and the date of filing and case number of each  
24 action.

25 (E) A description or summary of the facts of each claim, charge,  
26 or allegation, including the date of occurrence and the licensee's  
27 role in the care or professional services provided to the patient  
28 with respect to those services at issue in the claim or action.

29 (F) The name and last known business address of each attorney  
30 who represented a party in the settlement, arbitration, or civil  
31 action, including the name of the client he or she represented.

32 (G) The amount of the judgment, the date of its entry, and a  
33 copy of the judgment; the amount of the arbitration award, the date  
34 of its service on the parties, and a copy of the award document; or  
35 the amount of the settlement and the date it was reduced to writing  
36 and signed by all parties. If an otherwise reportable settlement is  
37 entered into after a reportable judgment or arbitration award is  
38 issued, the report shall include both the settlement and a copy of  
39 the judgment or award.

1 (H) The specialty or subspecialty of the licensee who was the  
2 subject of the claim or action.

3 (I) Any other information the Medical Board of California, the  
4 Osteopathic Medical Board of California, the California Board of  
5 Podiatric Medicine, or the Physician Assistant Board may, by  
6 regulation, require.

7 (3) Every professional liability insurer, self-insured  
8 governmental agency, or licensee or his or her counsel that makes  
9 a report under this section and has received a copy of any written  
10 or electronic patient medical or hospital records prepared by the  
11 treating physician and surgeon, podiatrist, or physician assistant,  
12 or the staff of the treating physician and surgeon, podiatrist, or  
13 hospital, describing the medical condition, history, care, or  
14 treatment of the person whose death or injury is the subject of the  
15 report, or a copy of any deposition in the matter that discusses the  
16 care, treatment, or medical condition of the person, shall include  
17 with the report, copies of the records and depositions, subject to  
18 reasonable costs to be paid by the Medical Board of California,  
19 the Osteopathic Medical Board of California, the California Board  
20 of Podiatric Medicine, or the Physician Assistant Board. If  
21 confidentiality is required by court order and, as a result, the  
22 reporter is unable to provide the records and depositions,  
23 documentation to that effect shall accompany the original report.  
24 The applicable board may, upon prior notification of the parties  
25 to the action, petition the appropriate court for modification of any  
26 protective order to permit disclosure to the board. A professional  
27 liability insurer, self-insured governmental agency, or licensee or  
28 his or her counsel shall maintain the records and depositions  
29 referred to in this paragraph for at least one year from the date of  
30 filing of the report required by this section.

31 (h) If the board, within 60 days of its receipt of a report filed  
32 under this section, notifies a person named in the report, that person  
33 shall maintain for the period of three years from the date of filing  
34 of the report any records he or she has as to the matter in question  
35 and shall make those records available upon request to the board  
36 to which the report was sent.

37 (i) Notwithstanding any other provision of law, no insurer shall  
38 enter into a settlement without the written consent of the insured,  
39 except that this prohibition shall not void any settlement entered

1 into without that written consent. The requirement of written  
2 consent shall only be waived by both the insured and the insurer.

3 (j) (1) A state or local governmental agency that self-insures  
4 licensees shall, prior to sending a report pursuant to this section,  
5 do all of the following with respect to each licensee who will be  
6 identified in the report:

7 (A) Before deciding that a licensee will be identified, provide  
8 written notice to the licensee that the agency intends to submit a  
9 report in which the licensee may be identified, based on his or her  
10 role in the care or professional services provided to the patient that  
11 were at issue in the claim or action. This notice shall describe the  
12 reasons for notifying the licensee. The agency shall include with  
13 this notice a reasonable opportunity for the licensee to review a  
14 copy of records to be used by the agency in deciding whether to  
15 identify the licensee in the report.

16 (B) Provide the licensee with a reasonable opportunity to provide  
17 a written response to the agency and written materials in support  
18 of the licensee's position. If the licensee is identified in the report,  
19 the agency shall include this response and materials in the report  
20 submitted to a board under this section if requested by the licensee.

21 (C) At least 10 days prior to the expiration of the 30-day  
22 reporting requirement under subdivision (d), provide the licensee  
23 with the opportunity to present arguments to the body that will  
24 make the final decision or to that body's designee. The body shall  
25 review the care or professional services provided to the patient  
26 with respect to those services at issue in the claim or action and  
27 determine the licensee or licensees to be identified in the report  
28 and the amount of the settlement to be apportioned to the licensee.

29 (2) Nothing in this subdivision shall be construed to modify  
30 either the content of a report required under this section or the  
31 timeframe for filing that report.

32 (k) For purposes of this section, "licensee" means a licensee of  
33 the Medical Board of California, the Osteopathic Medical Board  
34 of California, the California Board of Podiatric Medicine, or the  
35 Physician Assistant Board.

36 SEC. 3. Section 802.1 of the Business and Professions Code  
37 is amended to read:

38 802.1. (a) (1) A physician and surgeon, osteopathic physician  
39 and surgeon, a doctor of podiatric medicine, and a physician

1 assistant shall report either of the following to the entity that issued  
2 his or her license:

3 (A) The bringing of an indictment or information charging a  
4 felony against the licensee.

5 (B) The conviction of the licensee, including any verdict of  
6 guilty, or plea of guilty or no contest, of any felony or  
7 misdemeanor.

8 (2) The report required by this subdivision shall be made in  
9 writing within 30 days of the date of the bringing of the indictment  
10 or information or of the conviction.

11 (b) Failure to make a report required by this section shall be a  
12 public offense punishable by a fine not to exceed five thousand  
13 dollars (\$5,000).

14 SEC. 4. Section 802.5 of the Business and Professions Code  
15 is amended to read:

16 802.5. (a) When a coroner receives information that is based  
17 on findings that were reached by, or documented and approved by  
18 a board-certified or board-eligible pathologist indicating that a  
19 death may be the result of a physician and surgeon's, podiatrist's,  
20 or physician assistant's gross negligence or incompetence, a report  
21 shall be filed with the Medical Board of California, the Osteopathic  
22 Medical Board of California, the California Board of Podiatric  
23 Medicine, or the Physician Assistant Board. The initial report shall  
24 include the name of the decedent, date and place of death, attending  
25 physicians or podiatrists, and all other relevant information  
26 available. The initial report shall be followed, within 90 days, by  
27 copies of the coroner's report, autopsy protocol, and all other  
28 relevant information.

29 (b) The report required by this section shall be confidential. No  
30 coroner, physician and surgeon, or medical examiner, nor any  
31 authorized agent, shall be liable for damages in any civil action as  
32 a result of his or her acting in compliance with this section. No  
33 board-certified or board-eligible pathologist, nor any authorized  
34 agent, shall be liable for damages in any civil action as a result of  
35 his or her providing information under subdivision (a).

36 SEC. 5. Section 803 of the Business and Professions Code is  
37 amended to read:

38 803. (a) Except as provided in subdivision (b), within 10 days  
39 after a judgment by a court of this state that a person who holds a  
40 license, certificate, or other similar authority from the Board of

1 Behavioral Sciences or from an agency mentioned in subdivision  
2 (a) of Section 800 (except a person licensed pursuant to Chapter  
3 3 (commencing with Section 1200)) has committed a crime, or is  
4 liable for any death or personal injury resulting in a judgment for  
5 an amount in excess of thirty thousand dollars (\$30,000) caused  
6 by his or her negligence, error or omission in practice, or his or  
7 her rendering unauthorized professional services, the clerk of the  
8 court that rendered the judgment shall report that fact to the agency  
9 that issued the license, certificate, or other similar authority.

10 (b) For purposes of a physician and surgeon, osteopathic  
11 physician and surgeon, doctor of podiatric medicine, or physician  
12 assistant, who is liable for any death or personal injury resulting  
13 in a judgment of any amount caused by his or her negligence, error  
14 or omission in practice, or his or her rendering unauthorized  
15 professional services, the clerk of the court that rendered the  
16 judgment shall report that fact to the agency that issued the license.

17 SEC. 6. Section 803.1 of the Business and Professions Code  
18 is amended to read:

19 803.1. (a) Notwithstanding any other provision of law, the  
20 Medical Board of California, the Osteopathic Medical Board of  
21 California, the California Board of Podiatric Medicine, and the  
22 Physician Assistant Board shall disclose to an inquiring member  
23 of the public information regarding any enforcement actions taken  
24 against a licensee, including a former licensee, by the board or by  
25 another state or jurisdiction, including all of the following:

- 26 (1) Temporary restraining orders issued.  
27 (2) Interim suspension orders issued.  
28 (3) Revocations, suspensions, probations, or limitations on  
29 practice ordered by the board, including those made part of a  
30 probationary order or stipulated agreement.  
31 (4) Public letters of reprimand issued.  
32 (5) Infractions, citations, or fines imposed.

33 (b) Notwithstanding any other provision of law, in addition to  
34 the information provided in subdivision (a), the Medical Board of  
35 California, the Osteopathic Medical Board of California, the  
36 California Board of Podiatric Medicine, and the Physician Assistant  
37 Board shall disclose to an inquiring member of the public all of  
38 the following:

- 39 (1) Civil judgments in any amount, whether or not vacated by  
40 a settlement after entry of the judgment, that were not reversed on

1 appeal and arbitration awards in any amount of a claim or action  
2 for damages for death or personal injury caused by the physician  
3 and surgeon's negligence, error, or omission in practice, or by his  
4 or her rendering of unauthorized professional services.

5 (2) (A) All settlements in the possession, custody, or control  
6 of the board shall be disclosed for a licensee in the low-risk  
7 category if there are three or more settlements for that licensee  
8 within the last 10 years, except for settlements by a licensee  
9 regardless of the amount paid where (i) the settlement is made as  
10 a part of the settlement of a class claim, (ii) the licensee paid in  
11 settlement of the class claim the same amount as the other licensees  
12 in the same class or similarly situated licensees in the same class,  
13 and (iii) the settlement was paid in the context of a case where the  
14 complaint that alleged class liability on behalf of the licensee also  
15 alleged a products liability class action cause of action. All  
16 settlements in the possession, custody, or control of the board shall  
17 be disclosed for a licensee in the high-risk category if there are  
18 four or more settlements for that licensee within the last 10 years  
19 except for settlements by a licensee regardless of the amount paid  
20 where (i) the settlement is made as a part of the settlement of a  
21 class claim, (ii) the licensee paid in settlement of the class claim  
22 the same amount as the other licensees in the same class or  
23 similarly situated licensees in the same class, and (iii) the  
24 settlement was paid in the context of a case where the complaint  
25 that alleged class liability on behalf of the licensee also alleged a  
26 products liability class action cause of action. Classification of a  
27 licensee in either a "high-risk category" or a "low-risk category"  
28 depends upon the specialty or subspecialty practiced by the licensee  
29 and the designation assigned to that specialty or subspecialty by  
30 the Medical Board of California, as described in subdivision (f).  
31 For the purposes of this paragraph, "settlement" means a settlement  
32 of an action described in paragraph (1) entered into by the licensee  
33 on or after January 1, 2003, in an amount of thirty thousand dollars  
34 (\$30,000) or more.

35 (B) The board shall not disclose the actual dollar amount of a  
36 settlement but shall put the number and amount of the settlement  
37 in context by doing the following:

38 (i) Comparing the settlement amount to the experience of other  
39 licensees within the same specialty or subspecialty, indicating if

1 it is below average, average, or above average for the most recent  
2 10-year period.

3 (ii) Reporting the number of years the licensee has been in  
4 practice.

5 (iii) Reporting the total number of licensees in that specialty or  
6 subspecialty, the number of those who have entered into a  
7 settlement agreement, and the percentage that number represents  
8 of the total number of licensees in the specialty or subspecialty.

9 (3) Current American Board of Medical Specialties certification  
10 or board equivalent as certified by the Medical Board of California,  
11 the Osteopathic Medical Board of California, or the California  
12 Board of Podiatric Medicine.

13 (4) Approved postgraduate training.

14 (5) Status of the license of a licensee. By January 1, 2004, the  
15 Medical Board of California, the Osteopathic Medical Board of  
16 California, and the California Board of Podiatric Medicine shall  
17 adopt regulations defining the status of a licensee. The board shall  
18 employ this definition when disclosing the status of a licensee  
19 pursuant to Section 2027.

20 (6) Any summaries of hospital disciplinary actions that result  
21 in the termination or revocation of a licensee's staff privileges for  
22 medical disciplinary cause or reason, unless a court finds, in a final  
23 judgment, that the peer review resulting in the disciplinary action  
24 was conducted in bad faith and the licensee notifies the board of  
25 that finding. In addition, any exculpatory or explanatory statements  
26 submitted by the licensee electronically pursuant to subdivision  
27 (f) of that section shall be disclosed. For purposes of this paragraph,  
28 "peer review" has the same meaning as defined in Section 805.

29 (c) Notwithstanding any other provision of law, the Medical  
30 Board of California, the Osteopathic Medical Board of California,  
31 the California Board of Podiatric Medicine, and the Physician  
32 Assistant Board shall disclose to an inquiring member of the public  
33 information received regarding felony convictions of a physician  
34 and surgeon or doctor of podiatric medicine.

35 (d) The Medical Board of California, the Osteopathic Medical  
36 Board of California, the California Board of Podiatric Medicine,  
37 and the Physician Assistant Board may formulate appropriate  
38 disclaimers or explanatory statements to be included with any  
39 information released, and may by regulation establish categories  
40 of information that need not be disclosed to an inquiring member

1 of the public because that information is unreliable or not  
2 sufficiently related to the licensee's professional practice. The  
3 Medical Board of California, the Osteopathic Medical Board of  
4 California, the California Board of Podiatric Medicine, and the  
5 Physician Assistant Board shall include the following statement  
6 when disclosing information concerning a settlement:  
7

8 “Some studies have shown that there is no significant correlation  
9 between malpractice history and a doctor's competence. At the  
10 same time, the State of California believes that consumers should  
11 have access to malpractice information. In these profiles, the State  
12 of California has given you information about both the malpractice  
13 settlement history for the doctor's specialty and the doctor's history  
14 of settlement payments only if in the last 10 years, the doctor, if  
15 in a low-risk specialty, has three or more settlements or the doctor,  
16 if in a high-risk specialty, has four or more settlements. The State  
17 of California has excluded some class action lawsuits because  
18 those cases are commonly related to systems issues such as product  
19 liability, rather than questions of individual professional  
20 competence and because they are brought on a class basis where  
21 the economic incentive for settlement is great. The State of  
22 California has placed payment amounts into three statistical  
23 categories: below average, average, and above average compared  
24 to others in the doctor's specialty. To make the best health care  
25 decisions, you should view this information in perspective. You  
26 could miss an opportunity for high-quality care by selecting a  
27 doctor based solely on malpractice history.

28 When considering malpractice data, please keep in mind:

29 Malpractice histories tend to vary by specialty. Some specialties  
30 are more likely than others to be the subject of litigation. This  
31 report compares doctors only to the members of their specialty,  
32 not to all doctors, in order to make an individual doctor's history  
33 more meaningful.

34 This report reflects data only for settlements made on or after  
35 January 1, 2003. Moreover, it includes information concerning  
36 those settlements for a 10-year period only. Therefore, you should  
37 know that a doctor may have made settlements in the 10 years  
38 immediately preceding January 1, 2003, that are not included in  
39 this report. After January 1, 2013, for doctors practicing less than  
40 10 years, the data covers their total years of practice. You should

1 take into account the effective date of settlement disclosure as well  
2 as how long the doctor has been in practice when considering  
3 malpractice averages.

4 The incident causing the malpractice claim may have happened  
5 years before a payment is finally made. Sometimes, it takes a long  
6 time for a malpractice lawsuit to settle. Some doctors work  
7 primarily with high-risk patients. These doctors may have  
8 malpractice settlement histories that are higher than average  
9 because they specialize in cases or patients who are at very high  
10 risk for problems.

11 Settlement of a claim may occur for a variety of reasons that do  
12 not necessarily reflect negatively on the professional competence  
13 or conduct of the doctor. A payment in settlement of a medical  
14 malpractice action or claim should not be construed as creating a  
15 presumption that medical malpractice has occurred.

16 You may wish to discuss information in this report and the  
17 general issue of malpractice with your doctor.”

18  
19 (e) The Medical Board of California, the Osteopathic Medical  
20 Board of California, the California Board of Podiatric Medicine,  
21 and the Physician Assistant Board shall, by regulation, develop  
22 standard terminology that accurately describes the different types  
23 of disciplinary filings and actions to take against a licensee as  
24 described in paragraphs (1) to (5), inclusive, of subdivision (a). In  
25 providing the public with information about a licensee via the  
26 Internet pursuant to Section 2027, the Medical Board of California,  
27 the Osteopathic Medical Board of California, the California Board  
28 of Podiatric Medicine, and the Physician Assistant Board shall not  
29 use the terms “enforcement,” “discipline,” or similar language  
30 implying a sanction unless the physician and surgeon has been the  
31 subject of one of the actions described in paragraphs (1) to (5),  
32 inclusive, of subdivision (a).

33 (f) The Medical Board of California shall adopt regulations no  
34 later than July 1, 2003, designating each specialty and subspecialty  
35 practice area as either high risk or low risk. In promulgating these  
36 regulations, the board shall consult with commercial underwriters  
37 of medical malpractice insurance companies, health care systems  
38 that self-insure physicians and surgeons, and representatives of  
39 the California medical specialty societies. The board shall utilize  
40 the carriers’ statewide data to establish the two risk categories and

1 the averages required by subparagraph (B) of paragraph (2) of  
2 subdivision (b). Prior to issuing regulations, the board shall  
3 convene public meetings with the medical malpractice carriers,  
4 self-insurers, and specialty representatives.

5 (g) The Medical Board of California, the Osteopathic Medical  
6 Board of California, the California Board of Podiatric Medicine,  
7 the Physician Assistant Board shall provide each licensee, including  
8 a former licensee under subdivision (a), with a copy of the text of  
9 any proposed public disclosure authorized by this section prior to  
10 release of the disclosure to the public. The licensee shall have 10  
11 working days from the date the board provides the copy of the  
12 proposed public disclosure to propose corrections of factual  
13 inaccuracies. Nothing in this section shall prevent the board from  
14 disclosing information to the public prior to the expiration of the  
15 10-day period.

16 (h) Pursuant to subparagraph (A) of paragraph (2) of subdivision  
17 (b), the specialty or subspecialty information required by this  
18 section shall group physicians by specialty board recognized  
19 pursuant to paragraph (5) of subdivision (h) of Section 651 unless  
20 a different grouping would be more valid and the board, in its  
21 statement of reasons for its regulations, explains why the validity  
22 of the grouping would be more valid.

23 SEC. 7. Section 803.5 of the Business and Professions Code  
24 is amended to read:

25 803.5. (a) The district attorney, city attorney, or other  
26 prosecuting agency shall notify the Medical Board of California,  
27 the Osteopathic Medical Board of California, the California Board  
28 of Podiatric Medicine, the State Board of Chiropractic Examiners,  
29 the Physician Assistant Board, or other appropriate allied health  
30 board, and the clerk of the court in which the charges have been  
31 filed, of any filings against a licensee of that board charging a  
32 felony immediately upon obtaining information that the defendant  
33 is a licensee of the board. The notice shall identify the licensee  
34 and describe the crimes charged and the facts alleged. The  
35 prosecuting agency shall also notify the clerk of the court in which  
36 the action is pending that the defendant is a licensee, and the clerk  
37 shall record prominently in the file that the defendant holds a  
38 license from one of the boards described above.

39 (b) The clerk of the court in which a licensee of one of the  
40 boards is convicted of a crime shall, within 48 hours after the

1 conviction, transmit a certified copy of the record of conviction  
2 to the applicable board.

3 SEC. 8. Section 803.6 of the Business and Professions Code  
4 is amended to read:

5 803.6. (a) The clerk of the court shall transmit any felony  
6 preliminary hearing transcript concerning a defendant licensee to  
7 the Medical Board of California, the Osteopathic Medical Board  
8 of California, the California Board of Podiatric Medicine, the  
9 Physician Assistant Board, or other appropriate allied health board,  
10 as applicable, where the total length of the transcript is under 800  
11 pages and shall notify the appropriate board of any proceeding  
12 where the transcript exceeds that length.

13 (b) In any case where a probation report on a licensee is prepared  
14 for a court pursuant to Section 1203 of the Penal Code, a copy of  
15 that report shall be transmitted by the probation officer to the board.

16 SEC. 9. Section 805 of the Business and Professions Code is  
17 amended to read:

18 805. (a) As used in this section, the following terms have the  
19 following definitions:

20 (1) (A) "Peer review" means both of the following:

21 (i) A process in which a peer review body reviews the basic  
22 qualifications, staff privileges, employment, medical outcomes,  
23 or professional conduct of licentiates to make recommendations  
24 for quality improvement and education, if necessary, in order to  
25 do either or both of the following:

26 (I) Determine whether a licentiate may practice or continue to  
27 practice in a health care facility, clinic, or other setting providing  
28 medical services, and, if so, to determine the parameters of that  
29 practice.

30 (II) Assess and improve the quality of care rendered in a health  
31 care facility, clinic, or other setting providing medical services.

32 (ii) Any other activities of a peer review body as specified in  
33 subparagraph (B).

34 (B) "Peer review body" includes:

35 (i) A medical or professional staff of any health care facility or  
36 clinic licensed under Division 2 (commencing with Section 1200)  
37 of the Health and Safety Code or of a facility certified to participate  
38 in the federal Medicare program as an ambulatory surgical center.

39 (ii) A health care service plan licensed under Chapter 2.2  
40 (commencing with Section 1340) of Division 2 of the Health and

1 Safety Code or a disability insurer that contracts with licentiates  
2 to provide services at alternative rates of payment pursuant to  
3 Section 10133 of the Insurance Code.

4 (iii) Any medical, psychological, marriage and family therapy,  
5 social work, professional clinical counselor, dental, or podiatric  
6 professional society having as members at least 25 percent of the  
7 eligible licentiates in the area in which it functions (which must  
8 include at least one county), which is not organized for profit and  
9 which has been determined to be exempt from taxes pursuant to  
10 Section 23701 of the Revenue and Taxation Code.

11 (iv) A committee organized by any entity consisting of or  
12 employing more than 25 licentiates of the same class that functions  
13 for the purpose of reviewing the quality of professional care  
14 provided by members or employees of that entity.

15 (2) “Licentiate” means a physician and surgeon, doctor of  
16 podiatric medicine, clinical psychologist, marriage and family  
17 therapist, clinical social worker, professional clinical counselor,  
18 dentist, or physician assistant. “Licentiate” also includes a person  
19 authorized to practice medicine pursuant to Section 2113 or 2168.

20 (3) “Agency” means the relevant state licensing agency having  
21 regulatory jurisdiction over the licentiates listed in paragraph (2).

22 (4) “Staff privileges” means any arrangement under which a  
23 licentiate is allowed to practice in or provide care for patients in  
24 a health facility. Those arrangements shall include, but are not  
25 limited to, full staff privileges, active staff privileges, limited staff  
26 privileges, auxiliary staff privileges, provisional staff privileges,  
27 temporary staff privileges, courtesy staff privileges, locum tenens  
28 arrangements, and contractual arrangements to provide professional  
29 services, including, but not limited to, arrangements to provide  
30 outpatient services.

31 (5) “Denial or termination of staff privileges, membership, or  
32 employment” includes failure or refusal to renew a contract or to  
33 renew, extend, or reestablish any staff privileges, if the action is  
34 based on medical disciplinary cause or reason.

35 (6) “Medical disciplinary cause or reason” means that aspect  
36 of a licentiate’s competence or professional conduct that is  
37 reasonably likely to be detrimental to patient safety or to the  
38 delivery of patient care.

39 (7) “805 report” means the written report required under  
40 subdivision (b).

(b) The chief of staff of a medical or professional staff or other chief executive officer, medical director, or administrator of any peer review body and the chief executive officer or administrator of any licensed health care facility or clinic shall file an 805 report with the relevant agency within 15 days after the effective date on which any of the following occur as a result of an action of a peer review body:

(1) A licentiate's application for staff privileges or membership is denied or rejected for a medical disciplinary cause or reason.

(2) A licentiate's membership, staff privileges, or employment is terminated or revoked for a medical disciplinary cause or reason.

(3) Restrictions are imposed, or voluntarily accepted, on staff privileges, membership, or employment for a cumulative total of 30 days or more for any 12-month period, for a medical disciplinary cause or reason.

(c) If a licentiate takes any action listed in paragraph (1), (2), or (3) after receiving notice of a pending investigation initiated for a medical disciplinary cause or reason or after receiving notice that his or her application for membership or staff privileges is denied or will be denied for a medical disciplinary cause or reason, the chief of staff of a medical or professional staff or other chief executive officer, medical director, or administrator of any peer review body and the chief executive officer or administrator of any licensed health care facility or clinic where the licentiate is employed or has staff privileges or membership or where the licentiate applied for staff privileges or membership, or sought the renewal thereof, shall file an 805 report with the relevant agency within 15 days after the licentiate takes the action.

(1) Resigns or takes a leave of absence from membership, staff privileges, or employment.

(2) Withdraws or abandons his or her application for staff privileges or membership.

(3) Withdraws or abandons his or her request for renewal of staff privileges or membership.

(d) For purposes of filing an 805 report, the signature of at least one of the individuals indicated in subdivision (b) or (c) on the completed form shall constitute compliance with the requirement to file the report.

(e) An 805 report shall also be filed within 15 days following the imposition of summary suspension of staff privileges,

1 membership, or employment, if the summary suspension remains  
2 in effect for a period in excess of 14 days.

3 (f) A copy of the 805 report, and a notice advising the licentiate  
4 of his or her right to submit additional statements or other  
5 information, electronically or otherwise, pursuant to Section 800,  
6 shall be sent by the peer review body to the licentiate named in  
7 the report. The notice shall also advise the licentiate that  
8 information submitted electronically will be publicly disclosed to  
9 those who request the information.

10 The information to be reported in an 805 report shall include the  
11 name and license number of the licentiate involved, a description  
12 of the facts and circumstances of the medical disciplinary cause  
13 or reason, and any other relevant information deemed appropriate  
14 by the reporter.

15 A supplemental report shall also be made within 30 days  
16 following the date the licentiate is deemed to have satisfied any  
17 terms, conditions, or sanctions imposed as disciplinary action by  
18 the reporting peer review body. In performing its dissemination  
19 functions required by Section 805.5, the agency shall include a  
20 copy of a supplemental report, if any, whenever it furnishes a copy  
21 of the original 805 report.

22 If another peer review body is required to file an 805 report, a  
23 health care service plan is not required to file a separate report  
24 with respect to action attributable to the same medical disciplinary  
25 cause or reason. If the Medical Board of California or a licensing  
26 agency of another state revokes or suspends, without a stay, the  
27 license of a physician and surgeon, a peer review body is not  
28 required to file an 805 report when it takes an action as a result of  
29 the revocation or suspension.

30 (g) The reporting required by this section shall not act as a  
31 waiver of confidentiality of medical records and committee reports.  
32 The information reported or disclosed shall be kept confidential  
33 except as provided in subdivision (c) of Section 800 and Sections  
34 803.1 and 2027, provided that a copy of the report containing the  
35 information required by this section may be disclosed as required  
36 by Section 805.5 with respect to reports received on or after  
37 January 1, 1976.

38 (h) The Medical Board of California, the Osteopathic Medical  
39 Board of California, and the Dental Board of California shall  
40 disclose reports as required by Section 805.5.

1 (i) An 805 report shall be maintained electronically by an agency  
2 for dissemination purposes for a period of three years after receipt.

3 (j) No person shall incur any civil or criminal liability as the  
4 result of making any report required by this section.

5 (k) A willful failure to file an 805 report by any person who is  
6 designated or otherwise required by law to file an 805 report is  
7 punishable by a fine not to exceed one hundred thousand dollars  
8 (\$100,000) per violation. The fine may be imposed in any civil or  
9 administrative action or proceeding brought by or on behalf of any  
10 agency having regulatory jurisdiction over the person regarding  
11 whom the report was or should have been filed. If the person who  
12 is designated or otherwise required to file an 805 report is a  
13 licensed physician and surgeon, the action or proceeding shall be  
14 brought by the Medical Board of California. The fine shall be paid  
15 to that agency but not expended until appropriated by the  
16 Legislature. A violation of this subdivision may constitute  
17 unprofessional conduct by the licensee. A person who is alleged  
18 to have violated this subdivision may assert any defense available  
19 at law. As used in this subdivision, “willful” means a voluntary  
20 and intentional violation of a known legal duty.

21 (l) Except as otherwise provided in subdivision (k), any failure  
22 by the administrator of any peer review body, the chief executive  
23 officer or administrator of any health care facility, or any person  
24 who is designated or otherwise required by law to file an 805  
25 report, shall be punishable by a fine that under no circumstances  
26 shall exceed fifty thousand dollars (\$50,000) per violation. The  
27 fine may be imposed in any civil or administrative action or  
28 proceeding brought by or on behalf of any agency having  
29 regulatory jurisdiction over the person regarding whom the report  
30 was or should have been filed. If the person who is designated or  
31 otherwise required to file an 805 report is a licensed physician and  
32 surgeon, the action or proceeding shall be brought by the Medical  
33 Board of California. The fine shall be paid to that agency but not  
34 expended until appropriated by the Legislature. The amount of the  
35 fine imposed, not exceeding fifty thousand dollars (\$50,000) per  
36 violation, shall be proportional to the severity of the failure to  
37 report and shall differ based upon written findings, including  
38 whether the failure to file caused harm to a patient or created a  
39 risk to patient safety; whether the administrator of any peer review  
40 body, the chief executive officer or administrator of any health

1 care facility, or any person who is designated or otherwise required  
2 by law to file an 805 report exercised due diligence despite the  
3 failure to file or whether they knew or should have known that an  
4 805 report would not be filed; and whether there has been a prior  
5 failure to file an 805 report. The amount of the fine imposed may  
6 also differ based on whether a health care facility is a small or  
7 rural hospital as defined in Section 124840 of the Health and Safety  
8 Code.

9 (m) A health care service plan licensed under Chapter 2.2  
10 (commencing with Section 1340) of Division 2 of the Health and  
11 Safety Code or a disability insurer that negotiates and enters into  
12 a contract with licentiates to provide services at alternative rates  
13 of payment pursuant to Section 10133 of the Insurance Code, when  
14 determining participation with the plan or insurer, shall evaluate,  
15 on a case-by-case basis, licentiates who are the subject of an 805  
16 report, and not automatically exclude or deselect these licentiates.

17 *SEC. 10. Section 2006 of the Business and Professions Code*  
18 *is amended to read:*

19 2006. (a) Any reference in this chapter to an investigation by  
20 the board shall be deemed to refer to a joint investigation conducted  
21 by employees of the Department of Justice and the board under  
22 the vertical enforcement and prosecution model, as specified in  
23 Section 12529.6 of the Government Code.

24 (b) This section shall remain in effect only until January 1, ~~2013~~  
25 2014, and as of that date is repealed, unless a later enacted statute,  
26 that is enacted before January 1, ~~2013~~ 2014, deletes or extends  
27 that date.

28 ~~SEC. 10.~~

29 *SEC. 11. Section 2335 of the Business and Professions Code*  
30 *is amended to read:*

31 2335. (a) All proposed decisions and interim orders of the  
32 Medical Quality Hearing Panel designated in Section 11371 of the  
33 Government Code shall be transmitted to the executive director  
34 of the board, or the executive director of the California Board of  
35 Podiatric Medicine as to the licensees of that board, within 48  
36 hours of filing.

37 (b) All interim orders shall be final when filed.

38 (c) A proposed decision shall be acted upon by the board or by  
39 any panel appointed pursuant to Section 2008 or by the California  
40 Board of Podiatric Medicine, as the case may be, in accordance

1 with Section 11517 of the Government Code, except that all of the  
2 following shall apply to proceedings against licensees under this  
3 chapter:

4 (1) When considering a proposed decision, the board or panel  
5 and the California Board of Podiatric Medicine shall give great  
6 weight to the findings of fact of the administrative law judge,  
7 except to the extent those findings of fact are controverted by new  
8 evidence.

9 (2) The board's staff or the staff of the California Board of  
10 Podiatric Medicine shall poll the members of the board or panel  
11 or of the California Board of Podiatric Medicine by written mail  
12 ballot concerning the proposed decision. The mail ballot shall be  
13 sent within 10 calendar days of receipt of the proposed decision,  
14 and shall poll each member on whether the member votes to  
15 approve the decision, to approve the decision with an altered  
16 penalty, to refer the case back to the administrative law judge for  
17 the taking of additional evidence, to defer final decision pending  
18 discussion of the case by the panel or board as a whole, or to  
19 nonadopt the decision. No party to the proceeding, including  
20 employees of the agency that filed the accusation, and no person  
21 who has a direct or indirect interest in the outcome of the  
22 proceeding or who presided at a previous stage of the decision,  
23 may communicate directly or indirectly, upon the merits of a  
24 contested matter while the proceeding is pending, with any member  
25 of the panel or board, without notice and opportunity for all parties  
26 to participate in the communication. The votes of a majority of the  
27 board or of the panel, and a majority of the California Board of  
28 Podiatric Medicine, are required to approve the decision with an  
29 altered penalty, to refer the case back to the administrative law  
30 judge for the taking of further evidence, or to nonadopt the  
31 decision. The votes of two members of the panel or board are  
32 required to defer final decision pending discussion of the case by  
33 the panel or board as a whole; except that, in the case of the  
34 California Board of Podiatric Medicine, the vote of only one  
35 member of that board is required to defer final decision pending  
36 discussion of the case by the board as a whole. If there is a vote  
37 by the specified number to defer final decision pending discussion  
38 of the case by the panel or board as a whole, provision shall be  
39 made for that discussion before the 100-day period specified in

1 paragraph (3) expires, but in no event shall that 100-day period be  
2 extended.

3 (3) If a majority of the board or of the panel, or a majority of  
4 the California Board of Podiatric Medicine vote to do so, the board  
5 or the panel or the California Board of Podiatric Medicine shall  
6 issue an order of nonadoption of a proposed decision within 100  
7 calendar days of the date it is received by the board. If the board  
8 or the panel or the California Board of Podiatric Medicine does  
9 not refer the case back to the administrative law judge for the  
10 taking of additional evidence or issue an order of nonadoption  
11 within 100 calendar days, the decision shall be final and subject  
12 to review under Section 2337. Members of the board or of any  
13 panel or of the California Board of Podiatric Medicine who review  
14 a proposed decision or other matter and vote by mail as provided  
15 in paragraph (2) shall return their votes by mail to the board within  
16 30 days from receipt of the proposed decision or other matter.

17 (4) The board or the panel or the California Board of Podiatric  
18 Medicine shall afford the parties the opportunity to present oral  
19 argument before deciding a case after nonadoption of the  
20 administrative law judge's decision.

21 (5) A vote of a majority of the board or of a panel, or a majority  
22 of the California Board of Podiatric Medicine, are required to  
23 increase the penalty from that contained in the proposed  
24 administrative law judge's decision. No member of the board or  
25 panel or of the California Board of Podiatric Medicine may vote  
26 to increase the penalty except after reading the entire record and  
27 personally hearing any additional oral argument and evidence  
28 presented to the panel or board.

29 *SEC. 12. Section 2450.3 of the Business and Professions Code*  
30 *is amended to read:*

31 2450.3. There is within the jurisdiction of the Osteopathic  
32 Medical Board of California a Naturopathic Medicine Committee  
33 authorized under the Naturopathic Doctors Act (Chapter 8.2  
34 (commencing with Section 3610)). This section shall become  
35 inoperative on January 1, ~~2013~~ 2014, and, as of that date is  
36 repealed, unless a later enacted statute that is enacted before  
37 January 1, ~~2013~~ 2014, deletes or extends that date.—The  
38 *Notwithstanding any other provision of law, the* repeal of this  
39 section renders the Naturopathic Medicine Committee subject to

1 the review required by Division 1.2 (commencing with Section  
2 473) by the appropriate policy committees of the Legislature.

3 ~~SEC. 11.~~

4 *SEC. 13.* Section 2460 of the Business and Professions Code  
5 is amended to read:

6 2460. (a) There is created within the jurisdiction of the Medical  
7 Board of California the California Board of Podiatric Medicine.

8 (b) This section shall remain in effect only until January 1, 2017,  
9 and as of that date is repealed, unless a later enacted statute, that  
10 is enacted before January 1, 2017, deletes or extends that date.  
11 Notwithstanding any other provision of law, the repeal of this  
12 section renders the California Board of Podiatric Medicine subject  
13 to review by the appropriate policy committees of the Legislature.

14 ~~SEC. 12.~~

15 *SEC. 14.* Section 2465 of the Business and Professions Code  
16 is amended to read:

17 2465. No person who directly or indirectly owns any interest  
18 in any college, school, or other institution engaged in podiatric  
19 medical instruction shall be appointed to the board nor shall any  
20 incumbent member of the board have or acquire any interest, direct  
21 or indirect, in any such college, school, or institution.

22 ~~SEC. 13.~~

23 *SEC. 15.* Section 2470 of the Business and Professions Code  
24 is amended to read:

25 2470. The board may adopt, amend, or repeal, in accordance  
26 with the provisions of the Administrative Procedure Act (Chapter  
27 3.5 (commencing with Section 11340) of Part 1 of Division 1 of  
28 Title 2 of the Government Code), regulations necessary to enable  
29 the board to carry into effect the provisions of law relating to the  
30 practice of podiatric medicine.

31 ~~SEC. 14.~~

32 *SEC. 16.* Section 2472 of the Business and Professions Code  
33 is amended to read:

34 2472. (a) The certificate to practice podiatric medicine  
35 authorizes the holder to practice podiatric medicine.

36 (b) As used in this chapter, "podiatric medicine" means the  
37 diagnosis, medical, surgical, mechanical, manipulative, and  
38 electrical treatment of the human foot, including the ankle and  
39 tendons that insert into the foot and the nonsurgical treatment of

1 the muscles and tendons of the leg governing the functions of the  
2 foot.

3 (c) A doctor of podiatric medicine may not administer an  
4 anesthetic other than local. If an anesthetic other than local is  
5 required for any procedure, the anesthetic shall be administered  
6 by another licensed health care practitioner who is authorized to  
7 administer the required anesthetic within the scope of his or her  
8 practice.

9 (d) (1) A doctor of podiatric medicine who is ankle certified  
10 by the board on and after January 1, 1984, may do the following:

11 (A) Perform surgical treatment of the ankle and tendons at the  
12 level of the ankle pursuant to subdivision (e).

13 (B) Perform services under the direct supervision of a physician  
14 and surgeon, as an assistant at surgery, in surgical procedures that  
15 are otherwise beyond the scope of practice of a doctor of podiatric  
16 medicine.

17 (C) Perform a partial amputation of the foot no further proximal  
18 than the Chopart's joint.

19 (2) Nothing in this subdivision shall be construed to permit a  
20 doctor of podiatric medicine to function as a primary surgeon for  
21 any procedure beyond his or her scope of practice.

22 (e) A doctor of podiatric medicine may perform surgical  
23 treatment of the ankle and tendons at the level of the ankle only  
24 in the following locations:

25 (1) A licensed general acute care hospital, as defined in Section  
26 1250 of the Health and Safety Code.

27 (2) A licensed surgical clinic, as defined in Section 1204 of the  
28 Health and Safety Code, if the doctor of podiatric medicine has  
29 surgical privileges, including the privilege to perform surgery on  
30 the ankle, in a general acute care hospital described in paragraph  
31 (1) and meets all the protocols of the surgical clinic.

32 (3) An ambulatory surgical center that is certified to participate  
33 in the Medicare program under Title XVIII (42 U.S.C. Sec. 1395  
34 et seq.) of the federal Social Security Act, if the doctor of podiatric  
35 medicine has surgical privileges, including the privilege to perform  
36 surgery on the ankle, in a general acute care hospital described in  
37 paragraph (1) and meets all the protocols of the surgical center.

38 (4) A freestanding physical plant housing outpatient services  
39 of a licensed general acute care hospital, as defined in Section  
40 1250 of the Health and Safety Code, if the doctor of podiatric

1 medicine has surgical privileges, including the privilege to perform  
2 surgery on the ankle, in a general acute care hospital described in  
3 paragraph (1). For purposes of this section, a “freestanding physical  
4 plant” means any building that is not physically attached to a  
5 building where inpatient services are provided.

6 (5) An outpatient setting accredited pursuant to subdivision (g)  
7 of Section 1248.1 of the Health and Safety Code.

8 ~~SEC. 15.~~

9 *SEC. 17.* Section 2475 of the Business and Professions Code  
10 is amended to read:

11 2475. Unless otherwise provided by law, no postgraduate  
12 trainee, intern, resident postdoctoral fellow, or instructor may  
13 engage in the practice of podiatric medicine, or receive  
14 compensation therefor, or offer to engage in the practice of  
15 podiatric medicine unless he or she holds a valid, unrevoked, and  
16 unsuspended certificate to practice podiatric medicine issued by  
17 the division. However, a graduate of an approved college or school  
18 of podiatric medicine upon whom the degree doctor of podiatric  
19 medicine has been conferred, who is issued a resident’s license,  
20 which may be renewed annually *for up to eight years* for this  
21 purpose by the division upon recommendation of the board, and  
22 who is enrolled in a postgraduate training program approved by  
23 the board, may engage in the practice of podiatric medicine  
24 whenever and wherever required as a part of that program and may  
25 receive compensation for that practice under the following  
26 conditions:

27 (a) A graduate with a resident’s license in an approved  
28 internship, residency, or fellowship program may participate in  
29 training rotations outside the scope of podiatric medicine, under  
30 the supervision of a physician and surgeon who holds a medical  
31 doctor or doctor of osteopathy degree wherever and whenever  
32 required as a part of the training program, and may receive  
33 compensation for that practice. If the graduate fails to receive a  
34 license to practice podiatric medicine under this chapter within  
35 three years from the commencement of the postgraduate training,  
36 all privileges and exemptions under this section shall automatically  
37 cease.

38 (b) Hospitals functioning as a part of the teaching program of  
39 an approved college or school of podiatric medicine in this state  
40 may exchange instructors or resident or assistant resident doctors

1 of podiatric medicine with another approved college or school of  
2 podiatric medicine not located in this state, or those hospitals may  
3 appoint a graduate of an approved school as such a resident for  
4 purposes of postgraduate training. Those instructors and residents  
5 may practice and be compensated as provided in this section, but  
6 that practice and compensation shall be for a period not to exceed  
7 two years.

8 ~~SEC. 16.~~ ~~Section 2477 of the Business and Professions Code~~  
9 ~~is amended to read:~~

10 ~~2477. Nothing in this chapter prohibits the manufacture, the~~  
11 ~~recommendation, or the sale of either corrective shoes or appliances~~  
12 ~~for the human feet to enhance comfort and performance, or,~~  
13 ~~following diagnosis and prescription by a licensed practitioner in~~  
14 ~~any case involving medical conditions.~~

15 ~~SEC. 17.~~

16 *SEC. 18.* Section 2484 of the Business and Professions Code  
17 is amended to read:

18 2484. In addition to any other requirements of this chapter,  
19 before a certificate to practice podiatric medicine may be issued,  
20 each applicant shall show by evidence satisfactory to the board,  
21 submitted directly to the board by the sponsoring institution, that  
22 he or she has satisfactorily completed at least two years of  
23 postgraduate podiatric medical and podiatric surgical training in  
24 a general acute care hospital approved by the Council on Podiatric  
25 Medical Education.

26 ~~SEC. 18.~~

27 *SEC. 19.* Section 2493 of the Business and Professions Code  
28 is amended to read:

29 2493. An applicant for a certificate to practice podiatric  
30 medicine shall pass an examination in the subjects required by  
31 Section 2483 in order to ensure a minimum of entry-level  
32 competence.

33 ~~SEC. 19.~~

34 *SEC. 20.* Section 2496 of the Business and Professions Code  
35 is amended to read:

36 2496. In order to ensure the continuing competence of persons  
37 licensed to practice podiatric medicine, the board shall adopt and  
38 administer regulations requiring continuing education of those  
39 licensees. The board shall require those licensees to demonstrate

1 satisfaction of the continuing education requirements and one of  
2 the following requirements at each license renewal:

3 (a) Passage of an examination administered by the board within  
4 the past 10 years.

5 (b) Passage of an examination administered by an approved  
6 specialty certifying board within the past 10 years.

7 (c) Current diplomate, board-eligible, or board-qualified status  
8 granted by an approved specialty certifying board within the past  
9 10 years.

10 (d) Recertification of current status by an approved specialty  
11 certifying board within the past 10 years.

12 (e) Successful completion of an approved residency or  
13 fellowship program within the past 10 years.

14 (f) Granting or renewal of current staff privileges within the  
15 past five years by a health care facility that is licensed, certified,  
16 accredited, conducted, maintained, operated, or otherwise approved  
17 by an agency of the federal or state government or an organization  
18 approved by the Medical Board of California.

19 (g) Successful completion within the past five years of an  
20 extended course of study approved by the board.

21 (h) Passage within the past 10 years of Part III of the  
22 examination administered by the National Board of Podiatric  
23 Medical Examiners.

24 ~~SEC. 20.~~

25 *SEC. 21.* Section 2497.5 of the Business and Professions Code  
26 is amended to read:

27 2497.5. (a) The board may request the administrative law  
28 judge, under his or her proposed decision in resolution of a  
29 disciplinary proceeding before the board, to direct any licensee  
30 found guilty of unprofessional conduct to pay to the board a sum  
31 not to exceed the actual and reasonable costs of the investigation  
32 and prosecution of the case.

33 (b) The costs to be assessed shall be fixed by the administrative  
34 law judge and shall not be increased by the board unless the board  
35 does not adopt a proposed decision and in making its own decision  
36 finds grounds for increasing the costs to be assessed, not to exceed  
37 the actual and reasonable costs of the investigation and prosecution  
38 of the case.

39 (c) When the payment directed in the board's order for payment  
40 of costs is not made by the licensee, the board may enforce the

1 order for payment by bringing an action in any appropriate court.  
2 This right of enforcement shall be in addition to any other rights  
3 the board may have as to any licensee directed to pay costs.

4 (d) In any judicial action for the recovery of costs, proof of the  
5 board's decision shall be conclusive proof of the validity of the  
6 order of payment and the terms for payment.

7 (e) (1) Except as provided in paragraph (2), the board shall not  
8 renew or reinstate the license of any licensee who has failed to pay  
9 all of the costs ordered under this section.

10 (2) Notwithstanding paragraph (1), the board may, in its  
11 discretion, conditionally renew or reinstate for a maximum of one  
12 year the license of any licensee who demonstrates financial  
13 hardship and who enters into a formal agreement with the board  
14 to reimburse the board within that one-year period for those unpaid  
15 costs.

16 (f) All costs recovered under this section shall be deposited in  
17 the Board of Podiatric Medicine Fund as a reimbursement in either  
18 the fiscal year in which the costs are actually recovered or the  
19 previous fiscal year, as the board may direct.

20 *SEC. 22. Section 2602 of the Business and Professions Code*  
21 *is amended to read:*

22 2602. The Physical Therapy Board of California, hereafter  
23 referred to as the board, shall enforce and administer this chapter.  
24 ~~This section shall become inoperative on July 1, 2013, and, as of~~  
25 ~~January 1, 2014, is repealed, unless a later enacted statute, which~~  
26 ~~becomes effective on or before January 1, 2014, deletes or extends~~  
27 ~~the dates on which it becomes inoperative and is repealed.~~

28 *This section shall remain in effect only until January 1, 2014,*  
29 *and as of that date is repealed, unless a later enacted statute, that*  
30 *is enacted before January 1, 2014, deletes or extends that date.*

31 ~~The~~

32 *Notwithstanding any other provision of law, the repeal of this*  
33 *section renders the board subject to the review required by Division*  
34 ~~1.2 (commencing with Section 473) by the appropriate policy~~  
35 ~~committees of the Legislature.~~

36 *SEC. 23. Section 2607.5 of the Business and Professions Code*  
37 *is amended to read:*

38 2607.5. (a) The board may appoint a person exempt from  
39 civil service who shall be designated as an executive officer and

1 who shall exercise the powers and perform the duties delegated  
2 by the board and vested in him or her by this chapter.

3 ~~This section shall become inoperative on July 1, 2013, and, as~~  
4 ~~of January 1, 2014, is repealed, unless a later enacted statute, which~~  
5 ~~becomes effective on or before January 1, 2014, deletes or extends~~  
6 ~~the dates on which it becomes inoperative and is repealed.~~

7 ~~The repeal of this section renders the board subject to the review~~  
8 ~~required by Division 1.2 (commencing with Section 473).~~

9 *(b) This section shall remain in effect only until January 1, 2014,*  
10 *and as of that date is repealed, unless a later enacted statute, that*  
11 *is enacted before January 1, 2014, deletes or extends that date.*

12 SEC. 24. *Section 2920 of the Business and Professions Code*  
13 *is amended to read:*

14 2920. (a) The Board of Psychology shall enforce and  
15 administer this chapter. The board shall consist of nine members,  
16 four of whom shall be public members.

17 ~~This~~

18 *(b) This section shall remain in effect only until January 1, 2013*  
19 *2017, and as of that date is repealed, unless a later enacted statute,*  
20 *that is enacted before January 1, 2013 2017, deletes or extends*  
21 *that date.*

22 *(c) Notwithstanding any other provision of law, the repeal of*  
23 *this section renders the board subject to review by the appropriate*  
24 *policy committees of the Legislature.*

25 SEC. 25. *Section 2933 of the Business and Professions Code*  
26 *is amended to read:*

27 2933. Except as provided by Section 159.5, the board shall  
28 employ and shall make available to the board within the limits of  
29 the funds received by the board all personnel necessary to carry  
30 out this chapter. The board may employ, exempt from the State  
31 Civil Service Act, an executive officer to the Board of Psychology.  
32 The board shall make all expenditures to carry out this chapter.  
33 The board may accept contributions to effectuate the purposes of  
34 this chapter.

35 ~~This section shall remain in effect only until January 1, 2013~~  
36 ~~2017, and as of that date is repealed, unless a later enacted statute,~~  
37 ~~that is enacted before January 1, 2013 2017, deletes or extends~~  
38 ~~that date.~~

~~SEC. 21.~~

SEC. 26. Section 3501 of the Business and Professions Code is amended to read:

3501. (a) As used in this chapter:

(1) “Board” means the Physician Assistant Board.

(2) “Approved program” means a program for the education of physician assistants that has been formally approved by the board.

(3) “Trainee” means a person who is currently enrolled in an approved program.

(4) “Physician assistant” means a person who meets the requirements of this chapter and is licensed by the board.

(5) “Supervising physician” means a physician and surgeon licensed by the Medical Board of California or by the Osteopathic Medical Board of California who supervises one or more physician assistants, who possesses a current valid license to practice medicine, and who is not currently on disciplinary probation for improper use of a physician assistant.

(6) “Supervision” means that a licensed physician and surgeon oversees the activities of, and accepts responsibility for, the medical services rendered by a physician assistant.

(7) “Regulations” means the rules and regulations as set forth in Chapter 13.8 (commencing with Section 1399.500) of Title 16 of the California Code of Regulations.

(8) “Routine visual screening” means uninvase nonpharmacological simple testing for visual acuity, visual field defects, color blindness, and depth perception.

(9) “Program manager” means the staff manager of the diversion program, as designated by the executive officer of the board. The program manager shall have background experience in dealing with substance abuse issues.

(10) “Delegation of services agreement” means the writing that delegates to a physician assistant from a supervising physician the medical services the physician assistant is authorized to perform consistent with subdivision (a) of Section 1399.540 of Title 16 of the California Code of Regulations.

(11) “Other specified medical services” means tests or examinations performed or ordered by a physician assistant practicing in compliance with this chapter or regulations of the Medical Board of California promulgated under this chapter.

(b) A physician assistant acts as an agent of the supervising physician when performing any activity authorized by this chapter or regulations adopted under this chapter.

~~SEC. 22.~~

SEC. 27. Section 3502 of the Business and Professions Code is amended to read:

3502. (a) Notwithstanding any other provision of law, a physician assistant may perform those medical services as set forth by the regulations adopted under this chapter when the services are rendered under the supervision of a licensed physician and surgeon who is not subject to a disciplinary condition imposed by the Medical Board of California prohibiting that supervision or prohibiting the employment of a physician assistant.

(b) Notwithstanding any other provision of law, a physician assistant performing medical services under the supervision of a physician and surgeon may assist a doctor of podiatric medicine who is a partner, shareholder, or employee in the same medical group as the supervising physician and surgeon. A physician assistant who assists a doctor of podiatric medicine pursuant to this subdivision shall do so only according to patient-specific orders from the supervising physician and surgeon.

The supervising physician and surgeon shall be physically available to the physician assistant for consultation when such assistance is rendered. A physician assistant assisting a doctor of podiatric medicine shall be limited to performing those duties included within the scope of practice of a doctor of podiatric medicine.

(c) (1) A physician assistant and his or her supervising physician and surgeon shall establish written guidelines for the adequate supervision of the physician assistant. This requirement may be satisfied by the supervising physician and surgeon adopting protocols for some or all of the tasks performed by the physician assistant. The protocols adopted pursuant to this subdivision shall comply with the following requirements:

(A) A protocol governing diagnosis and management shall, at a minimum, include the presence or absence of symptoms, signs, and other data necessary to establish a diagnosis or assessment, any appropriate tests or studies to order, drugs to recommend to the patient, and education to be provided to the patient.

1 (B) A protocol governing procedures shall set forth the  
2 information to be provided to the patient, the nature of the consent  
3 to be obtained from the patient, the preparation and technique of  
4 the procedure, and the followup care.

5 (C) Protocols shall be developed by the supervising physician  
6 and surgeon or adopted from, or referenced to, texts or other  
7 sources.

8 (D) Protocols shall be signed and dated by the supervising  
9 physician and surgeon and the physician assistant.

10 (2) The supervising physician and surgeon shall review,  
11 countersign, and date a sample consisting of, at a minimum, 5  
12 percent of the medical records of patients treated by the physician  
13 assistant functioning under the protocols within 30 days of the date  
14 of treatment by the physician assistant. The physician and surgeon  
15 shall select for review those cases that by diagnosis, problem,  
16 treatment, or procedure represent, in his or her judgment, the most  
17 significant risk to the patient.

18 (3) Notwithstanding any other provision of law, the Medical  
19 Board of California or board may establish other alternative  
20 mechanisms for the adequate supervision of the physician assistant.

21 (d) No medical services may be performed under this chapter  
22 in any of the following areas:

23 (1) The determination of the refractive states of the human eye,  
24 or the fitting or adaptation of lenses or frames for the aid thereof.

25 (2) The prescribing or directing the use of, or using, any optical  
26 device in connection with ocular exercises, visual training, or  
27 orthoptics.

28 (3) The prescribing of contact lenses for, or the fitting or  
29 adaptation of contact lenses to, the human eye.

30 (4) The practice of dentistry or dental hygiene or the work of a  
31 dental auxiliary as defined in Chapter 4 (commencing with Section  
32 1600).

33 (e) This section shall not be construed in a manner that shall  
34 preclude the performance of routine visual screening as defined  
35 in Section 3501.

36 ~~SEC. 23.~~

37 *SEC. 28.* Section 3502.1 of the Business and Professions Code  
38 is amended to read:

39 3502.1. (a) In addition to the services authorized in the  
40 regulations adopted by the Medical Board of California, and except

1 as prohibited by Section 3502, while under the supervision of a  
2 licensed physician and surgeon or physicians and surgeons  
3 authorized by law to supervise a physician assistant, a physician  
4 assistant may administer or provide medication to a patient, or  
5 transmit orally, or in writing on a patient's record or in a drug  
6 order, an order to a person who may lawfully furnish the  
7 medication or medical device pursuant to subdivisions (c) and (d).

8 (1) A supervising physician and surgeon who delegates authority  
9 to issue a drug order to a physician assistant may limit this authority  
10 by specifying the manner in which the physician assistant may  
11 issue delegated prescriptions.

12 (2) Each supervising physician and surgeon who delegates the  
13 authority to issue a drug order to a physician assistant shall first  
14 prepare and adopt, or adopt, a written, practice specific, formulary  
15 and protocols that specify all criteria for the use of a particular  
16 drug or device, and any contraindications for the selection.  
17 Protocols for Schedule II controlled substances shall address the  
18 diagnosis of illness, injury, or condition for which the Schedule II  
19 controlled substance is being administered, provided, or issued.  
20 The drugs listed in the protocols shall constitute the formulary and  
21 shall include only drugs that are appropriate for use in the type of  
22 practice engaged in by the supervising physician and surgeon.  
23 When issuing a drug order, the physician assistant is acting on  
24 behalf of and as an agent for a supervising physician and surgeon.

25 (b) "Drug order," for purposes of this section, means an order  
26 for medication that is dispensed to or for a patient, issued and  
27 signed by a physician assistant acting as an individual practitioner  
28 within the meaning of Section 1306.02 of Title 21 of the Code of  
29 Federal Regulations. Notwithstanding any other provision of law,  
30 (1) a drug order issued pursuant to this section shall be treated in  
31 the same manner as a prescription or order of the supervising  
32 physician, (2) all references to "prescription" in this code and the  
33 Health and Safety Code shall include drug orders issued by  
34 physician assistants pursuant to authority granted by their  
35 supervising physicians and surgeons, and (3) the signature of a  
36 physician assistant on a drug order shall be deemed to be the  
37 signature of a prescriber for purposes of this code and the Health  
38 and Safety Code.

39 (c) A drug order for any patient cared for by the physician  
40 assistant that is issued by the physician assistant shall either be

1 based on the protocols described in subdivision (a) or shall be  
2 approved by the supervising physician and surgeon before it is  
3 filled or carried out.

4 (1) A physician assistant shall not administer or provide a drug  
5 or issue a drug order for a drug other than for a drug listed in the  
6 formulary without advance approval from a supervising physician  
7 and surgeon for the particular patient. At the direction and under  
8 the supervision of a physician and surgeon, a physician assistant  
9 may hand to a patient of the supervising physician and surgeon a  
10 properly labeled prescription drug prepackaged by a physician and  
11 surgeon, manufacturer as defined in the Pharmacy Law, or a  
12 pharmacist.

13 (2) A physician assistant may not administer, provide, or issue  
14 a drug order to a patient for Schedule II through Schedule V  
15 controlled substances without advance approval by a supervising  
16 physician and surgeon for that particular patient unless the  
17 physician assistant has completed an education course that covers  
18 controlled substances and that meets standards, including  
19 pharmacological content, approved by the board. The education  
20 course shall be provided either by an accredited continuing  
21 education provider or by an approved physician assistant training  
22 program. If the physician assistant will administer, provide, or  
23 issue a drug order for Schedule II controlled substances, the course  
24 shall contain a minimum of three hours exclusively on Schedule  
25 II controlled substances. Completion of the requirements set forth  
26 in this paragraph shall be verified and documented in the manner  
27 established by the board prior to the physician assistant's use of a  
28 registration number issued by the United States Drug Enforcement  
29 Administration to the physician assistant to administer, provide,  
30 or issue a drug order to a patient for a controlled substance without  
31 advance approval by a supervising physician and surgeon for that  
32 particular patient.

33 (3) Any drug order issued by a physician assistant shall be  
34 subject to a reasonable quantitative limitation consistent with  
35 customary medical practice in the supervising physician and  
36 surgeon's practice.

37 (d) A written drug order issued pursuant to subdivision (a),  
38 except a written drug order in a patient's medical record in a health  
39 facility or medical practice, shall contain the printed name, address,  
40 and telephone number of the supervising physician and surgeon,

1 the printed or stamped name and license number of the physician  
2 assistant, and the signature of the physician assistant. Further, a  
3 written drug order for a controlled substance, except a written drug  
4 order in a patient's medical record in a health facility or a medical  
5 practice, shall include the federal controlled substances registration  
6 number of the physician assistant and shall otherwise comply with  
7 the provisions of Section 11162.1 of the Health and Safety Code.  
8 Except as otherwise required for written drug orders for controlled  
9 substances under Section 11162.1 of the Health and Safety Code,  
10 the requirements of this subdivision may be met through stamping  
11 or otherwise imprinting on the supervising physician and surgeon's  
12 prescription blank to show the name, license number, and if  
13 applicable, the federal controlled substances registration number  
14 of the physician assistant, and shall be signed by the physician  
15 assistant. When using a drug order, the physician assistant is acting  
16 on behalf of and as the agent of a supervising physician and  
17 surgeon.

18 (e) The medical record of any patient cared for by a physician  
19 assistant for whom the physician assistant's Schedule II drug order  
20 has been issued or carried out shall be reviewed and countersigned  
21 and dated by a supervising physician and surgeon within seven  
22 days.

23 (f) All physician assistants who are authorized by their  
24 supervising physicians to issue drug orders for controlled  
25 substances shall register with the United States Drug Enforcement  
26 Administration (DEA).

27 (g) The board shall consult with the Medical Board of California  
28 and report during its sunset review required by Division 1.2  
29 (commencing with Section 473) the impacts of exempting Schedule  
30 III and Schedule IV drug orders from the requirement for a  
31 physician and surgeon to review and countersign the affected  
32 medical record of a patient.

33 ~~SEC. 24.~~

34 *SEC. 29.* Section 3502.3 of the Business and Professions Code  
35 is amended to read:

36 3502.3. (a) Notwithstanding any other provision of law, in  
37 addition to any other practices that meet the general criteria set  
38 forth in this chapter or the Medical Board of California's  
39 regulations for inclusion in a delegation of services agreement, a

1 delegation of services agreement may authorize a physician  
2 assistant to do any of the following:

3 (1) Order durable medical equipment, subject to any limitations  
4 set forth in Section 3502 or the delegation of services agreement.  
5 Notwithstanding that authority, nothing in this paragraph shall  
6 operate to limit the ability of a third-party payer to require prior  
7 approval.

8 (2) For individuals receiving home health services or personal  
9 care services, after consultation with the supervising physician,  
10 approve, sign, modify, or add to a plan of treatment or plan of care.

11 (b) Nothing in this section shall be construed to affect the  
12 validity of any delegation of services agreement in effect prior to  
13 the enactment of this section or those adopted subsequent to  
14 enactment.

15 ~~SEC. 25.~~

16 *SEC. 30.* Section 3502.5 of the Business and Professions Code  
17 is amended to read:

18 3502.5. Notwithstanding any other provision of law, a physician  
19 assistant may perform those medical services permitted pursuant  
20 to Section 3502 during any state of war emergency, state of  
21 emergency, or state of local emergency, as defined in Section 8558  
22 of the Government Code, and at the request of a responsible federal,  
23 state, or local official or agency, or pursuant to the terms of a  
24 mutual aid operation plan established and approved pursuant to  
25 the California Emergency Services Act (Chapter 7 (commencing  
26 with Section 8550) of Division 1 of Title 2 of the Government  
27 Code), regardless of whether the physician assistant's approved  
28 supervising physician is available to supervise the physician  
29 assistant, so long as a licensed physician is available to render the  
30 appropriate supervision. "Appropriate supervision" shall not require  
31 the personal or electronic availability of a supervising physician  
32 if that availability is not possible or practical due to the emergency.  
33 The local health officers and their designees may act as supervising  
34 physicians during emergencies without being subject to approval  
35 by the Medical Board of California. At all times, the local health  
36 officers or their designees supervising the physician assistants shall  
37 be licensed physicians and surgeons. Supervising physicians acting  
38 pursuant to this section shall not be subject to the limitation on the  
39 number of physician assistants supervised under Section 3516.

1 No responsible official or mutual aid operation plan shall invoke  
2 this section except in the case of an emergency that endangers the  
3 health of individuals. Under no circumstances shall this section  
4 be invoked as the result of a labor dispute or other dispute  
5 concerning collective bargaining.

6 ~~SEC. 26.~~

7 *SEC. 31.* Section 3504 of the Business and Professions Code  
8 is amended to read:

9 3504. There is established a Physician Assistant Board within  
10 the jurisdiction of the Medical Board of California. The board  
11 consists of nine members. This section shall remain in effect only  
12 until January 1, 2017, and as of that date is repealed, unless a later  
13 enacted statute, that is enacted before January 1, 2017, deletes or  
14 extends that date. Notwithstanding any other provision of law,  
15 the repeal of this section renders the board subject to review by  
16 the appropriate policy committees of the Legislature.

17 ~~SEC. 27.~~

18 *SEC. 32.* Section 3504.1 of the Business and Professions Code  
19 is amended to read:

20 3504.1. Protection of the public shall be the highest priority  
21 for the Physician Assistant Board in exercising its licensing,  
22 regulatory, and disciplinary functions. Whenever the protection  
23 of the public is inconsistent with other interests sought to be  
24 promoted, the protection of the public shall be paramount.

25 ~~SEC. 28.~~

26 *SEC. 33.* Section 3505 of the Business and Professions Code  
27 is amended to read:

28 3505. The members of the board shall include four physician  
29 assistants, one physician and surgeon who is also a member of the  
30 Medical Board of California, and four public members. Upon the  
31 expiration of the term of the member who is a member of the  
32 Medical Board of California, that position shall be filled by a  
33 physician assistant. Upon the expiration of the term of the member  
34 who is a member of the Medical Board of California, above, there  
35 shall be appointed to the board a physician and surgeon who is  
36 also a member of the Medical Board of California who shall serve  
37 as an ex officio, nonvoting member and whose functions shall  
38 include reporting to the Medical Board of California on the actions  
39 or discussions of the board. Following the expiration of the term  
40 of the member described above, the board shall include five

1 physician assistants, one physician and surgeon, and four public  
2 members.

3 Each member of the board shall hold office for a term of four  
4 years expiring on January 1st, and shall serve until the appointment  
5 and qualification of a successor or until one year shall have elapsed  
6 since the expiration of the term for which the member was  
7 appointed, whichever first occurs. No member shall serve for more  
8 than two consecutive terms. Vacancies shall be filled by  
9 appointment for the unexpired terms.

10 The Governor shall appoint the licensed members qualified as  
11 provided in this section and two public members. The Senate Rules  
12 Committee and the Speaker of the Assembly shall each appoint a  
13 public member.

14 ~~SEC. 29.~~

15 *SEC. 34.* Section 3506 of the Business and Professions Code  
16 is amended to read:

17 3506. Each member of the board shall receive a per diem and  
18 expenses as provided in Section 103.

19 ~~SEC. 30.~~

20 *SEC. 35.* Section 3507 of the Business and Professions Code  
21 is amended to read:

22 3507. The appointing power has power to remove from office  
23 any member of the board, as provided in Section 106.

24 ~~SEC. 31.~~

25 *SEC. 36.* Section 3508 of the Business and Professions Code  
26 is amended to read:

27 3508. (a) The board may convene from time to time as deemed  
28 necessary by the board.

29 (b) Notice of each meeting of the board shall be given at least  
30 two weeks in advance to those persons and organizations who  
31 express an interest in receiving notification.

32 (c) The board shall receive permission of the director to meet  
33 more than six times annually. The director shall approve meetings  
34 that are necessary for the board to fulfill its legal responsibilities.

35 ~~SEC. 32.~~

36 *SEC. 37.* Section 3509 of the Business and Professions Code  
37 is amended to read:

38 3509. It shall be the duty of the board to:

39 (a) Establish standards and issue licenses of approval for  
40 programs for the education and training of physician assistants.

1 (b) Make recommendations to the Medical Board of California  
2 concerning the scope of practice for physician assistants.

3 (c) Make recommendations to the Medical Board of California  
4 concerning the formulation of guidelines for the consideration of  
5 applications by licensed physicians to supervise physician assistants  
6 and approval of such applications.

7 (d) Require the examination of applicants for licensure as a  
8 physician assistant who meet the requirements of this chapter.

9 ~~SEC. 33.~~

10 *SEC. 38.* Section 3509.5 of the Business and Professions Code  
11 is amended to read:

12 3509.5. The board shall elect annually a chairperson and a vice  
13 chairperson from among its members.

14 ~~SEC. 34.~~

15 *SEC. 39.* Section 3510 of the Business and Professions Code  
16 is amended to read:

17 3510. The board may adopt, amend, and repeal regulations as  
18 may be necessary to enable it to carry into effect the provisions of  
19 this chapter; provided, however, that the Medical Board of  
20 California shall adopt, amend, and repeal such regulations as may  
21 be necessary to enable the board to implement the provisions of  
22 this chapter under its jurisdiction. All regulations shall be in  
23 accordance with, and not inconsistent with, the provisions of this  
24 chapter. Such regulations shall be adopted, amended, or repealed  
25 in accordance with the provisions of Chapter 3.5 (commencing  
26 with Section 11340) of Part 1 of Division 3 of Title 2 of the  
27 Government Code.

28 ~~SEC. 35.~~

29 *SEC. 40.* Section 3511 of the Business and Professions Code  
30 is amended to read:

31 3511. Five members shall constitute a quorum for transacting  
32 any business. The affirmative vote of a majority of those present  
33 at a meeting of the board shall be required to carry any motion.  
34 The physician and surgeon who serves as an ex officio member  
35 shall not be counted for purposes of a quorum.

36 ~~SEC. 36.~~

37 *SEC. 41.* Section 3512 of the Business and Professions Code  
38 is amended to read:

39 3512. (a) Except as provided in Sections 159.5 and 2020, the  
40 board shall employ within the limits of the Physician Assistant

1 Fund all personnel necessary to carry out the provisions of this  
2 chapter including an executive officer who shall be exempt from  
3 civil service. The Medical Board of California and board shall  
4 make all necessary expenditures to carry out the provisions of this  
5 chapter from the funds established by Section 3520. The board  
6 may accept contributions to effect the purposes of this chapter.

7 (b) This section shall remain in effect only until January 1, 2017,  
8 and as of that date is repealed, unless a later enacted statute, that  
9 is enacted before January 1, 2017, deletes or extends that date.

10 ~~SEC. 37.~~

11 *SEC. 42.* Section 3513 of the Business and Professions Code  
12 is amended to read:

13 3513. The board shall recognize the approval of training  
14 programs for physician assistants approved by a national  
15 accrediting organization. Physician assistant training programs  
16 accredited by a national accrediting agency approved by the board  
17 shall be deemed approved by the board under this section. If no  
18 national accrediting organization is approved by the board, the  
19 board may examine and pass upon the qualification of, and may  
20 issue certificates of approval for, programs for the education and  
21 training of physician assistants that meet board standards.

22 ~~SEC. 38.~~

23 *SEC. 43.* Section 3514.1 of the Business and Professions Code  
24 is amended to read:

25 3514.1. (a) The board shall formulate by regulation guidelines  
26 for the consideration of applications for licensure as a physician  
27 assistant.

28 (b) The board shall formulate by regulation guidelines for the  
29 approval of physician assistant training programs.

30 ~~SEC. 39.~~

31 *SEC. 44.* Section 3516 of the Business and Professions Code  
32 is amended to read:

33 3516. (a) Notwithstanding any other provision of law, a  
34 physician assistant licensed by the board shall be eligible for  
35 employment or supervision by any physician and surgeon who is  
36 not subject to a disciplinary condition imposed by the Medical  
37 Board of California prohibiting that employment or supervision.

38 (b) No physician and surgeon shall supervise more than four  
39 physician assistants at any one time, except as provided in Section  
40 3502.5.

(c) The Medical Board of California may restrict a physician and surgeon to supervising specific types of physician assistants including, but not limited to, restricting a physician and surgeon from supervising physician assistants outside of the field of specialty of the physician and surgeon.

~~SEC. 40.~~

*SEC. 45.* Section 3516.5 of the Business and Professions Code is amended to read:

3516.5. (a) Notwithstanding any other provision of law and in accordance with regulations established by the Medical Board of California, the director of emergency care services in a hospital with an approved program for the training of emergency care physician assistants, may apply to the Medical Board of California for authorization under which the director may grant approval for emergency care physicians on the staff of the hospital to supervise emergency care physician assistants.

(b) The application shall encompass all supervising physicians employed in that service.

(c) Nothing in this section shall be construed to authorize any one emergency care physician while on duty to supervise more than four physician assistants at any one time.

(d) A violation of this section by the director of emergency care services in a hospital with an approved program for the training of emergency care physician assistants constitutes unprofessional conduct within the meaning of Chapter 5 (commencing with Section 2000).

(e) A violation of this section shall be grounds for suspension of the approval of the director or disciplinary action against the director or suspension of the approved program under Section 3527.

~~SEC. 41.~~

*SEC. 46.* Section 3517 of the Business and Professions Code is amended to read:

3517. The board shall require a written examination of physician assistants in the manner and under the rules and regulations as it shall prescribe, but the examination shall be conducted in that manner as to ensure that the identity of each applicant taking the examination will be unknown to all of the examiners until all examination papers have been graded. Except as otherwise provided in this chapter, or by regulation, no physician

1 assistant applicant shall receive approval under this chapter without  
2 first successfully passing an examination given under the direction  
3 of the board.

4 Examinations for licensure as a physician assistant may be  
5 required by the board under a uniform examination system, and  
6 for that purpose the board may make those arrangements with  
7 organizations furnishing examination material as may, in its  
8 discretion, be desirable. The board shall, however, establish a  
9 passing score for each examination. The licensure examination for  
10 physician assistants shall be held by the board at least once a year  
11 with such additional examinations as the board deems necessary.  
12 The time and place of examination shall be fixed by the board.

13 ~~SEC. 42.~~

14 *SEC. 47.* Section 3518 of the Business and Professions Code  
15 is amended to read:

16 3518. The board shall keep current, two separate registers, one  
17 for approved supervising physicians and one for licensed physician  
18 assistants, by specialty if applicable. These registers shall show  
19 the name of each licensee, his or her last known address of record,  
20 and the date of his or her licensure or approval. Any interested  
21 person is entitled to obtain a copy of the register in accordance  
22 with the Information Practices Act of 1977 (Chapter 1  
23 (commencing with Section 1798) of Title 1.8 of Part 4 of Division  
24 3 of the Civil Code) upon application to the board together with a  
25 sum as may be fixed by the board, which amount shall not exceed  
26 the cost of this list so furnished.

27 ~~SEC. 43.~~

28 *SEC. 48.* Section 3519 of the Business and Professions Code  
29 is amended to read:

30 3519. The board shall issue under the name of the Medical  
31 Board of California a license to all physician assistant applicants  
32 who meet all of the following requirements:

33 (a) Provide evidence of successful completion of an approved  
34 program.

35 (b) Pass any examination required under Section 3517.

36 (c) Not be subject to denial of licensure under Division 1.5  
37 (commencing with Section 475) or Section 3527.

38 (d) Pay all fees required under Section 3521.1.

1     ~~SEC. 44.~~

2     *SEC. 49.* Section 3519.5 of the Business and Professions Code  
3 is amended to read:

4     3519.5. (a) The board may issue under the name of the Medical  
5 Board of California a probationary license to an applicant subject  
6 to terms and conditions, including, but not limited to, any of the  
7 following conditions of probation:

8       (1) Practice limited to a supervised, structured environment  
9 where the applicant's activities shall be supervised by another  
10 physician assistant.

11       (2) Total or partial restrictions on issuing a drug order for  
12 controlled substances.

13       (3) Continuing medical or psychiatric treatment.

14       (4) Ongoing participation in a specified rehabilitation program.

15       (5) Enrollment and successful completion of a clinical training  
16 program.

17       (6) Abstention from the use of alcohol or drugs.

18       (7) Restrictions against engaging in certain types of medical  
19 services.

20       (8) Compliance with all provisions of this chapter.

21     (b) The board and the Medical Board of California may modify  
22 or terminate the terms and conditions imposed on the probationary  
23 license upon receipt of a petition from the licensee.

24     (c) Enforcement and monitoring of the probationary conditions  
25 shall be under the jurisdiction of the board and the Medical Board  
26 of California. These proceedings shall be conducted in accordance  
27 with Chapter 5 (commencing with Section 11500) of Part 1 of  
28 Division 3 of Title 2 of the Government Code.

29     ~~SEC. 45.~~

30     *SEC. 50.* Section 3520 of the Business and Professions Code  
31 is amended to read:

32     3520. Within 10 days after the beginning of each calendar  
33 month the Medical Board of California shall report to the Controller  
34 the amount and source of all collections made under this chapter  
35 and at the same time pay all those sums into the State Treasury,  
36 where they shall be credited to the Physician Assistant Fund, which  
37 fund is hereby created. All money in the fund shall be used to carry  
38 out the purpose of this chapter.

~~SEC. 46.~~

*SEC. 51.* Section 3521 of the Business and Professions Code is amended to read:

3521. The fees to be paid for approval to supervise physician assistants are to be set by the board as follows:

(a) An application fee not to exceed fifty dollars (\$50) shall be charged to each physician and surgeon applicant.

(b) An approval fee not to exceed two hundred fifty dollars (\$250) shall be charged to each physician and surgeon upon approval of an application to supervise physician assistants.

(c) A biennial renewal fee not to exceed three hundred dollars (\$300) shall be paid for the renewal of an approval.

(d) The delinquency fee is twenty-five dollars (\$25).

(e) The duplicate approval fee is ten dollars (\$10).

(f) The fee for a letter of endorsement, letter of good standing, or letter of verification of approval shall be ten dollars (\$10).

~~SEC. 47.~~

*SEC. 52.* Section 3521.1 of the Business and Professions Code is amended to read:

3521.1. The fees to be paid by physician assistants are to be set by the board as follows:

(a) An application fee not to exceed twenty-five dollars (\$25) shall be charged to each physician assistant applicant.

(b) An initial license fee not to exceed two hundred fifty dollars (\$250) shall be charged to each physician assistant to whom a license is issued.

(c) A biennial license renewal fee not to exceed three hundred dollars (\$300).

(d) The delinquency fee is twenty-five dollars (\$25).

(e) The duplicate license fee is ten dollars (\$10).

(f) The fee for a letter of endorsement, letter of good standing, or letter of verification of licensure shall be ten dollars (\$10).

~~SEC. 48.~~

*SEC. 53.* Section 3521.2 of the Business and Professions Code is amended to read:

3521.2. The fees to be paid by physician assistant training programs are to be set by the board as follows:

(a) An application fee not to exceed five hundred dollars (\$500) shall be charged to each applicant seeking program approval by the board.

(b) An approval fee not to exceed one hundred dollars (\$100) shall be charged to each program upon its approval by the board.

~~SEC. 49.~~

*SEC. 54.* Section 3521.3 is added to the Business and Professions Code, to read:

3521.3. (a) The board may establish, by regulation, a system for the placement of a license on a retired status, upon application, for a physician assistant who is not actively engaged in practice as a physician assistant or any activity that requires them to be licensed by the board.

(b) No licensee with a license on a retired status shall engage in any activity for which a license is required.

(c) The board shall deny an applicant's application for a retired status license if the license is canceled or if the license is suspended, revoked, or otherwise punitively restricted by the board or subject to disciplinary action under this chapter.

(d) Beginning one year from the effective date of the regulations adopted pursuant to subdivision (a), if an applicant's license is delinquent, the board shall deny an applicant's application for a retired status license.

(e) The board shall establish minimum qualifications for a retired status license.

(f) The board may exempt the holder of a retired status license from the renewal requirements described in Section 3524.5.

(g) The board shall establish minimum qualifications for the restoration of a license in a retired status to an active status. These minimum qualifications shall include, but are not limited to, continuing education and payment of a fee as provided in subdivision (c) of Section 3521.1.

~~SEC. 50.~~

*SEC. 55.* Section 3521.5 of the Business and Professions Code is amended to read:

3521.5. The board shall report to the appropriate policy and fiscal committees of each house of the Legislature whenever the Medical Board of California approves a fee increase pursuant to Sections 3521 and 3521.1. The board shall specify the reasons for each increase in the report. Reports prepared pursuant to this section shall identify the percentage of funds derived from an increase in fees pursuant to Senate Bill 1077 of the 1991–92 Regular Session (Chapter 917, Statutes of 1991) that will be used

1 for investigational and enforcement activities by the Medical Board  
2 of California and board.

3 ~~SEC. 51.~~

4 *SEC. 56.* Section 3522 of the Business and Professions Code  
5 is amended to read:

6 3522. An approval to supervise physician assistants shall expire  
7 at 12 midnight on the last day of the birth month of the physician  
8 and surgeon during the second year of a two-year term if not  
9 renewed.

10 The Medical Board of California shall establish a cyclical  
11 renewal program, including, but not limited to, the establishment  
12 of a system of staggered expiration dates for approvals and a pro  
13 rata formula for the payment of renewal fees by physician and  
14 surgeon supervisors.

15 To renew an unexpired approval, the approved supervising  
16 physician and surgeon, on or before the date of expiration, shall  
17 apply for renewal on a form prescribed by the Medical Board of  
18 California and pay the prescribed renewal fee.

19 ~~SEC. 52.~~

20 *SEC. 57.* Section 3523 of the Business and Professions Code  
21 is amended to read:

22 3523. All physician assistant licenses shall expire at 12  
23 midnight of the last day of the birth month of the licensee during  
24 the second year of a two-year term if not renewed.

25 The board shall establish by regulation procedures for the  
26 administration of a birthdate renewal program, including, but not  
27 limited to, the establishment of a system of staggered license  
28 expiration dates and a pro rata formula for the payment of renewal  
29 fees by physician assistants affected by the implementation of the  
30 program.

31 To renew an unexpired license, the licensee shall, on or before  
32 the date of expiration of the license, apply for renewal on a form  
33 provided by the board, accompanied by the prescribed renewal  
34 fee.

35 ~~SEC. 53.~~

36 *SEC. 58.* Section 3524 of the Business and Professions Code  
37 is amended to read:

38 3524. A license or approval that has expired may be renewed  
39 at any time within five years after its expiration by filing an  
40 application for renewal on a form prescribed by the board or

1 Medical Board of California, as the case may be, and payment of  
2 all accrued and unpaid renewal fees. If the license or approval is  
3 not renewed within 30 days after its expiration, the licensed  
4 physician assistant and approved supervising physician, as a  
5 condition precedent to renewal, shall also pay the prescribed  
6 delinquency fee, if any. Renewal under this section shall be  
7 effective on the date on which the application is filed, on the date  
8 on which all renewal fees are paid, or on the date on which the  
9 delinquency fee, if any, is paid, whichever occurs last. If so  
10 renewed, the license shall continue in effect through the expiration  
11 date provided in Section 3522 or 3523 which next occurs after the  
12 effective date of the renewal, when it shall expire, if it is not again  
13 renewed.

14 ~~SEC. 54.~~

15 *SEC. 59.* Section 3524.5 of the Business and Professions Code  
16 is amended to read:

17 3524.5. The board may require a licensee to complete  
18 continuing education as a condition of license renewal under  
19 Section 3523 or 3524. The board shall not require more than 50  
20 hours of continuing education every two years. The board shall,  
21 as it deems appropriate, accept certification by the National  
22 Commission on Certification of Physician Assistants (NCCPA),  
23 or another qualified certifying body, as determined by the board,  
24 as evidence of compliance with continuing education requirements.

25 ~~SEC. 55.~~

26 *SEC. 60.* Section 3526 of the Business and Professions Code  
27 is amended to read:

28 3526. A person who fails to renew his or her license or approval  
29 within five years after its expiration may not renew it, and it may  
30 not be reissued, reinstated, or restored thereafter, but that person  
31 may apply for and obtain a new license or approval if he or she:

32 (a) Has not committed any acts or crimes constituting grounds  
33 for denial of licensure under Division 1.5 (commencing with  
34 Section 475).

35 (b) Takes and passes the examination, if any, which would be  
36 required of him or her if application for licensure was being made  
37 for the first time, or otherwise establishes to the satisfaction of the  
38 board that, with due regard for the public interest, he or she is  
39 qualified to practice as a physician assistant.

1 (c) Pays all of the fees that would be required as if application  
2 for licensure was being made for the first time.

3 ~~SEC. 56.~~

4 *SEC. 61.* Section 3527 of the Business and Professions Code  
5 is amended to read:

6 3527. (a) The board may order the denial of an application  
7 for, or the issuance subject to terms and conditions of, or the  
8 suspension or revocation of, or the imposition of probationary  
9 conditions upon a physician assistant license after a hearing as  
10 required in Section 3528 for unprofessional conduct that includes,  
11 but is not limited to, a violation of this chapter, a violation of the  
12 Medical Practice Act, or a violation of the regulations adopted by  
13 the board or the Medical Board of California.

14 (b) The board may order the denial of an application for, or the  
15 suspension or revocation of, or the imposition of probationary  
16 conditions upon, an approved program after a hearing as required  
17 in Section 3528 for a violation of this chapter or the regulations  
18 adopted pursuant thereto.

19 (c) The Medical Board of California may order the denial of an  
20 application for, or the issuance subject to terms and conditions of,  
21 or the suspension or revocation of, or the imposition of  
22 probationary conditions upon, an approval to supervise a physician  
23 assistant, after a hearing as required in Section 3528, for  
24 unprofessional conduct, which includes, but is not limited to, a  
25 violation of this chapter, a violation of the Medical Practice Act,  
26 or a violation of the regulations adopted by the board or the  
27 Medical Board of California.

28 (d) Notwithstanding subdivision (c), the Division of Medical  
29 Quality of the Medical Board of California, in conjunction with  
30 an action it has commenced against a physician and surgeon, may,  
31 in its own discretion and without the concurrence of the Medical  
32 Board of California, order the suspension or revocation of, or the  
33 imposition of probationary conditions upon, an approval to  
34 supervise a physician assistant, after a hearing as required in  
35 Section 3528, for unprofessional conduct, which includes, but is  
36 not limited to, a violation of this chapter, a violation of the Medical  
37 Practice Act, or a violation of the regulations adopted by the board  
38 or the Medical Board of California.

39 (e) The board may order the denial of an application for, or the  
40 suspension or revocation of, or the imposition of probationary

1 conditions upon, a physician assistant license, after a hearing as  
2 required in Section 3528 for unprofessional conduct that includes,  
3 except for good cause, the knowing failure of a licensee to protect  
4 patients by failing to follow infection control guidelines of the  
5 board, thereby risking transmission of bloodborne infectious  
6 diseases from licensee to patient, from patient to patient, and from  
7 patient to licensee. In administering this subdivision, the board  
8 shall consider referencing the standards, regulations, and guidelines  
9 of the State Department of Public Health developed pursuant to  
10 Section 1250.11 of the Health and Safety Code and the standards,  
11 regulations, and guidelines pursuant to the California Occupational  
12 Safety and Health Act of 1973 (Part 1 (commencing with Section  
13 6300) of Division 5 of the Labor Code) for preventing the  
14 transmission of HIV, hepatitis B, and other bloodborne pathogens  
15 in health care settings. As necessary, the board shall consult with  
16 the Medical Board of California, the Board of Podiatric Medicine,  
17 the Board of Dental Examiners, the Board of Registered Nursing,  
18 and the Board of Vocational Nursing and Psychiatric Technicians,  
19 to encourage appropriate consistency in the implementation of this  
20 subdivision.

21 The board shall seek to ensure that licensees are informed of the  
22 responsibility of licensees and others to follow infection control  
23 guidelines, and of the most recent scientifically recognized  
24 safeguards for minimizing the risk of transmission of blood-borne  
25 infectious diseases.

26 (f) The board may order the licensee to pay the costs of  
27 monitoring the probationary conditions imposed on the license.

28 (g) The expiration, cancellation, forfeiture, or suspension of a  
29 physician assistant license by operation of law or by order or  
30 decision of the board or a court of law, the placement of a license  
31 on a retired status, or the voluntary surrender of a license by a  
32 licensee shall not deprive the board of jurisdiction to commence  
33 or proceed with any investigation of, or action or disciplinary  
34 proceeding against, the licensee or to render a decision suspending  
35 or revoking the license.

36 ~~SEC. 57.~~

37 *SEC. 62.* Section 3529 of the Business and Professions Code  
38 is amended to read:

39 3529. The board may hear any matters filed pursuant to  
40 subdivisions (a) and (b) of Section 3527, or may assign the matter

1 to a hearing officer. The Medical Board of California may hear  
2 any matters filed pursuant to subdivision (c) of Section 3527, or  
3 may assign the matter to a hearing officer. If a matter is heard by  
4 the board or the Medical Board of California, the hearing officer  
5 who presided at the hearing shall be present during the board's or  
6 the Medical Board of California's consideration of the case, and,  
7 if requested, assist and advise the board or the Medical Board of  
8 California.

9 ~~SEC. 58.~~

10 *SEC. 63.* Section 3530 of the Business and Professions Code  
11 is amended to read:

12 3530. (a) A person whose license or approval has been revoked  
13 or suspended, or who has been placed on probation, may petition  
14 the board for reinstatement or modification of penalty, including  
15 modification or termination of probation, after a period of not less  
16 than the following minimum periods has elapsed from the effective  
17 date of the decision ordering that disciplinary action:

18 (1) At least three years for reinstatement of a license or approval  
19 revoked for unprofessional conduct, except that the board may,  
20 for good cause shown, specify in a revocation order that a petition  
21 for reinstatement may be filed after two years.

22 (2) At least two years for early termination of probation of three  
23 years or more.

24 (3) At least one year for modification of a condition, or  
25 reinstatement of a license or approval revoked for mental or  
26 physical illness, or termination of probation of less than three years.

27 (b) The petition shall state any facts as may be required by the  
28 Medical Board of California. The petition shall be accompanied  
29 by at least two verified recommendations from physicians licensed  
30 either by the Medical Board of California or the Osteopathic  
31 Medical Board who have personal knowledge of the activities of  
32 the petitioner since the disciplinary penalty was imposed.

33 (c) The petition may be heard by the board. The board may  
34 assign the petition to an administrative law judge designated in  
35 Section 11371 of the Government Code. After a hearing on the  
36 petition, the administrative law judge shall provide a proposed  
37 decision to the board that shall be acted upon in accordance with  
38 the Administrative Procedure Act.

39 (d) The board or the administrative law judge hearing the  
40 petition, may consider all activities of the petitioner since the

1 disciplinary action was taken, the offense for which the petitioner  
2 was disciplined, the petitioner's activities during the time the  
3 license was in good standing, and the petitioner's rehabilitative  
4 efforts, general reputation for truth, and professional ability. The  
5 hearing may be continued, as the board or administrative law judge  
6 finds necessary.

7 (e) The board or administrative law judge, when hearing a  
8 petition for reinstating a license or approval or modifying a penalty,  
9 may recommend the imposition of any terms and conditions  
10 deemed necessary.

11 (f) No petition shall be considered while the petitioner is under  
12 sentence for any criminal offense, including any period during  
13 which the petitioner is on court-imposed probation or parole. No  
14 petition shall be considered while there is an accusation or petition  
15 to revoke probation pending against the person. The board may  
16 deny, without a hearing or argument, any petition filed pursuant  
17 to this section within a period of two years from the effective date  
18 of the prior decision following a hearing under this section.

19 (g) Nothing in this section shall be deemed to alter Sections 822  
20 and 823.

21 ~~SEC. 59.~~

22 *SEC. 64.* Section 3531 of the Business and Professions Code  
23 is amended to read:

24 3531. A plea or verdict of guilty or a conviction following a  
25 plea of nolo contendere made to a charge of a felony or of any  
26 offense which is substantially related to the qualifications,  
27 functions, or duties of the business or profession to which the  
28 license was issued is deemed to be a conviction within the meaning  
29 of this chapter. The board may order the license suspended or  
30 revoked, or shall decline to issue a license when the time for appeal  
31 has elapsed, or the judgment of conviction has been affirmed on  
32 appeal or when an order granting probation is made suspending  
33 the imposition of sentence, irrespective of a subsequent order under  
34 the provisions of Section 1203.4 of the Penal Code allowing such  
35 person to withdraw his or her plea of guilty and to enter a plea of  
36 not guilty, or setting aside the verdict of guilty, or dismissing the  
37 accusation, information, or indictment.

38 ~~SEC. 60.~~

39 *SEC. 65.* Section 3533 of the Business and Professions Code  
40 is amended to read:

1     3533. Whenever any person has engaged in any act or practice  
2     which constitutes an offense against this chapter, the superior court  
3     of any county, on application of the Medical Board of California,  
4     may issue an injunction or other appropriate order restraining such  
5     conduct. Proceedings under this section shall be governed by  
6     Chapter 3 (commencing with Section 525) of Title 7 of Part 2 of  
7     the Code of Civil Procedure. The Medical Board of California or  
8     the board may commence action in the superior court under the  
9     provisions of this section.

10    ~~SEC. 61.~~

11    *SEC. 66.* Section 3534 of the Business and Professions Code  
12    is amended to read:

13    3534. It is the intent of the Legislature that the board shall seek  
14    ways and means to identify and rehabilitate physician assistants  
15    whose competency is impaired due to abuse of dangerous drugs  
16    or alcohol so that they may be treated and returned to the practice  
17    of medicine in a manner which will not endanger the public health  
18    and safety.

19    ~~SEC. 62.~~

20    *SEC. 67.* Section 3534.1 of the Business and Professions Code  
21    is amended to read:

22    3534.1. The board shall establish and administer a diversion  
23    program for the rehabilitation of physician assistants whose  
24    competency is impaired due to the abuse of drugs or alcohol. The  
25    board may contract with any other state agency or a private  
26    organization to perform its duties under this article. The board may  
27    establish one or more diversion evaluation committees to assist it  
28    in carrying out its duties under this article. As used in this article,  
29    “committee” means a diversion evaluation committee. A committee  
30    created under this article operates under the direction of the  
31    diversion program manager, as designated by the executive officer  
32    of the board. The program manager has the primary responsibility  
33    to review and evaluate recommendations of the committee.

34    ~~SEC. 63.~~

35    *SEC. 68.* Section 3534.2 of the Business and Professions Code  
36    is amended to read:

37    3534.2. (a) Any committee established by the board shall have  
38    at least three members. In making appointments to a committee  
39    the board shall consider the appointments of persons who are either  
40    recovering of substance abuse and have been free from abuse for

1 at least three years immediately prior to their appointment or who  
2 are knowledgeable in the treatment and recovery of substance  
3 abuse. The board also shall consider the appointment of a physician  
4 and surgeon who is board certified in psychiatry.

5 (b) Appointments to a committee shall be by the affirmative  
6 vote of a majority of members appointed to the board. Each  
7 appointment shall be at the pleasure of the board for a term not to  
8 exceed four years. In its discretion, the board may stagger the terms  
9 of the initial members so appointed.

10 (c) A majority of the members of a committee shall constitute  
11 a quorum for the transaction of business. Any action requires an  
12 affirmative vote of a majority of those members present at a  
13 meeting constituting at least a quorum. Each committee shall elect  
14 from its membership a chairperson and a vice chairperson.  
15 Notwithstanding Article 9 (commencing with Section 11120) of  
16 Chapter 1 of Part 1 of Division 3 of Title 2 of the Government  
17 Code, relating to public meetings, a committee may convene in  
18 closed session to consider matters relating to any physician  
19 assistant applying for or participating in a diversion program, and  
20 a meeting which will be convened entirely in closed session need  
21 not comply with Section 11125 of the Government Code. A  
22 committee shall only convene in closed session to the extent it is  
23 necessary to protect the privacy of an applicant or participant. Each  
24 member of a committee shall receive a per diem and shall be  
25 reimbursed for expenses as provided in Section 103.

26 ~~SEC. 64.~~

27 *SEC. 69.* Section 3534.3 of the Business and Professions Code  
28 is amended to read:

29 3534.3. Each committee has the following duties and  
30 responsibilities:

31 (a) To evaluate physician assistants who request participation  
32 in the program and to make recommendations to the program  
33 manager. In making recommendations, a committee shall consider  
34 any recommendations from professional consultants on the  
35 admission of applicants to the diversion program.

36 (b) To review and designate treatment facilities to which  
37 physician assistants in the diversion program may be referred, and  
38 to make recommendations to the program manager.

39 (c) The receipt and review of information concerning physician  
40 assistants participating in the program.

1 (d) To call meetings as necessary to consider the requests of  
2 physician assistants to participate in the diversion program, to  
3 consider reports regarding participants in the program, and to  
4 consider any other matters referred to it by the board.

5 (e) To consider whether each participant in the diversion  
6 program may with safety continue or resume the practice of  
7 medicine.

8 (f) To set forth in writing the terms and conditions of the  
9 diversion agreement that is approved by the program manager for  
10 each physician assistant participating in the program, including  
11 treatment, supervision, and monitoring requirements.

12 (g) To hold a general meeting at least twice a year, which shall  
13 be open and public, to evaluate the diversion program's progress,  
14 to prepare reports to be submitted to the board, and to suggest  
15 proposals for changes in the diversion program.

16 (h) For the purposes of Division 3.6 (commencing with Section  
17 810) of Title 1 of the Government Code, any member of a  
18 committee shall be considered a public employee. No board or  
19 committee member, contractor, or agent thereof, shall be liable  
20 for any civil damage because of acts or omissions which may occur  
21 while acting in good faith in a program established pursuant to  
22 this article.

23 ~~SEC. 65.~~

24 *SEC. 70.* Section 3534.4 of the Business and Professions Code  
25 is amended to read:

26 3534.4. Criteria for acceptance into the diversion program shall  
27 include all of the following: (a) the applicant shall be licensed as  
28 a physician assistant by the board and shall be a resident of  
29 California; (b) the applicant shall be found to abuse dangerous  
30 drugs or alcoholic beverages in a manner which may affect his or  
31 her ability to practice medicine safely or competently; (c) the  
32 applicant shall have voluntarily requested admission to the program  
33 or shall be accepted into the program in accordance with terms  
34 and conditions resulting from a disciplinary action; (d) the applicant  
35 shall agree to undertake any medical or psychiatric examination  
36 ordered to evaluate the applicant for participation in the program;  
37 (e) the applicant shall cooperate with the program by providing  
38 medical information, disclosure authorizations, and releases of  
39 liability as may be necessary for participation in the program; and

(f) the applicant shall agree in writing to cooperate with all elements of the treatment program designed for him or her.

An applicant may be denied participation in the program if the board, the program manager, or a committee determines that the applicant will not substantially benefit from participation in the program or that the applicant's participation in the program creates too great a risk to the public health, safety, or welfare.

~~SEC. 66.~~

*SEC. 71.* Section 3534.5 of the Business and Professions Code is amended to read:

3534.5. A participant may be terminated from the program for any of the following reasons: (a) the participant has successfully completed the treatment program; (b) the participant has failed to comply with the treatment program designated for him or her; (c) the participant fails to meet any of the criteria set forth in subdivision (d); or (d) it is determined that the participant has not substantially benefited from participation in the program or that his or her continued participation in the program creates too great a risk to the public health, safety, or welfare. Whenever an applicant is denied participation in the program or a participant is terminated from the program for any reason other than the successful completion of the program, and it is determined that the continued practice of medicine by that individual creates too great a risk to the public health and safety, that fact shall be reported to the executive officer of the board and all documents and information pertaining to and supporting that conclusion shall be provided to the executive officer. The matter may be referred for investigation and disciplinary action by the board. Each physician assistant who requests participation in a diversion program shall agree to cooperate with the recovery program designed for him or her. Any failure to comply with that program may result in termination of participation in the program.

The board shall inform each participant in the program of the procedures followed in the program, of the rights and responsibilities of a physician assistant in the program, and the possible results of noncompliance with the program.

~~SEC. 67.~~

*SEC. 72.* Section 3534.6 of the Business and Professions Code is amended to read:

1 3534.6. In addition to the criteria and causes set forth in Section  
2 3534.4, the board may set forth in its regulations additional criteria  
3 for admission to the program or causes for termination from the  
4 program.

5 ~~SEC. 68.~~

6 *SEC. 73.* Section 3534.7 of the Business and Professions Code  
7 is amended to read:

8 3534.7. All board and committee records and records of  
9 proceedings and participation of a physician assistant in a program  
10 shall be confidential and are not subject to discovery or subpoena.

11 ~~SEC. 69.~~

12 *SEC. 74.* Section 3534.9 of the Business and Professions Code  
13 is amended to read:

14 3534.9. If the board contracts with any other entity to carry  
15 out this section, the executive officer of the board or the program  
16 manager shall review the activities and performance of the  
17 contractor on a biennial basis. As part of this review, the board  
18 shall review files of participants in the program. However, the  
19 names of participants who entered the program voluntarily shall  
20 remain confidential, except when the review reveals misdiagnosis,  
21 case mismanagement, or noncompliance by the participant.

22 ~~SEC. 70.~~

23 *SEC. 75.* Section 3534.10 of the Business and Professions Code  
24 is amended to read:

25 3534.10. Participation in a diversion program shall not be a  
26 defense to any disciplinary action which may be taken by the board.  
27 This section does not preclude the board from commencing  
28 disciplinary action against a physician assistant who is terminated  
29 unsuccessfully from the program under this section. That  
30 disciplinary action may not include as evidence any confidential  
31 information.

32 ~~SEC. 71.~~

33 *SEC. 76.* Section 3535 of the Business and Professions Code  
34 is amended to read:

35 3535. (a) Notwithstanding any other provision of law,  
36 physicians and surgeons licensed by the Osteopathic Medical Board  
37 of California may use or employ physician assistants provided (1)  
38 each physician assistant so used or employed is a graduate of an  
39 approved program and is licensed by the board, and (2) the scope  
40 of practice of the physician assistant is the same as that which is

1 approved by the Division of Licensing of the Medical Board of  
2 California for physicians and surgeons supervising physician  
3 assistants in the same or similar specialty.

4 (b) Any person who violates subdivision (a) shall be guilty of  
5 a misdemeanor punishable by imprisonment in a county jail not  
6 exceeding six months, or by a fine not exceeding one thousand  
7 dollars (\$1,000), or by both that imprisonment and fine.

8 (c) This section shall become operative on July 1, 2001.

9 ~~SEC. 72.~~

10 *SEC. 77.* Section 3537.10 of the Business and Professions Code  
11 is amended to read:

12 3537.10. (a) Subject to the other provisions of this article, the  
13 Office of Statewide Health Planning and Development, hereafter  
14 in this article referred to as the office, shall coordinate the  
15 establishment of an international medical graduate physician  
16 assistant training program, to be conducted at an appropriate  
17 educational institution or institutions. The goal of the program  
18 shall be to place as many international medical graduate physician  
19 assistants in medically underserved areas as possible in order to  
20 provide greater access to care for the growing population of  
21 medically indigent and underserved. The method for accomplishing  
22 this goal shall be to train foreign medical graduates to become  
23 licensed as physician assistants at no cost to the participants in  
24 return for a commitment from the participants to serve full time  
25 in underserved areas for a four-year period.

26 (b) By February 1, 1994, or one month after federal funds to  
27 implement this article become available, whichever occurs later,  
28 the office shall establish a training program advisory task force.  
29 The task force shall be comprised of representatives from all of  
30 the following groups:

- 31 (1) Physician assistant program directors.
- 32 (2) Foreign medical graduates.
- 33 (3) The California Academy of Physician Assistants.
- 34 (4) Nonprofit community health center directors.
- 35 (5) Physicians.
- 36 (6) The board, at the board's option.

37 The office may, instead, serve solely as a consultant to the task  
38 force.

39 (c) The task force shall do all of the following:

(1) Develop a recommended curriculum for the training program that shall be from 12 to 15 months in duration and shall, at a minimum, meet curriculum standards consistent with the board's regulations. The program shall be subject to the board's approval. By April 1, 1994, or three months after federal funds to implement this article become available, whichever occurs later, the curriculum shall be presented by the office to the Committee on Allied Health Education and Accreditation of the American Medical Association, or its successor organization, for approval.

(2) Develop recommended admission criteria for participation in the pilot and ongoing program.

(3) Assist in development of linkages with academic institutions for the purpose of monitoring and evaluating the pilot program.

~~SEC. 73.~~

*SEC. 78.* Section 3537.20 of the Business and Professions Code is amended to read:

3537.20. Any person who has satisfactorily completed the program established by this article shall be eligible for licensure by the board as a "physician assistant" if the person has complied with all of the following requirements:

(a) Has successfully completed the written examination required under Section 3517.

(b) Has successfully completed the Test of English as a Foreign Language (TOEFL).

~~SEC. 74.~~

*SEC. 79.* Section 3537.30 of the Business and Professions Code is amended to read:

3537.30. (a) The Legislature recognizes that the goal of this program would be compromised if participants do not observe their commitments under this program to provide the required service in a medically underserved area. The goal of this program would not be met if all that it accomplished was merely to license physician assistants that served populations that are not medically underserved.

(b) Since damages would be difficult or impossible to ascertain in the event of default by the participant, this section shall set forth the extent of liquidated damages that shall be recoverable by the program in the case of default.

(c) In the case of default by a participant who has successfully completed the program and has obtained licensure under this

1 article, the program shall collect the following damages from the  
2 participant:

3 (1) The total cost expended by the program for the training of  
4 the applicant, and interest thereon from the date of default.

5 (2) The total amount needed for the program to seek cover as  
6 set forth in subdivision (b) of Section 3537.35.

7 (3) The costs of enforcement, including, but not limited to, the  
8 costs of collecting the liquidated damages, the costs of litigation,  
9 and attorney's fees.

10 (d) The Attorney General may represent the office, or the board,  
11 or both in any litigation necessitated by this article, or, if the  
12 Attorney General declines, the office, or the board, or both may  
13 hire other counsel for this purpose.

14 (e) Funds collected pursuant to subdivision (c) shall be allocated  
15 as follows:

16 (1) Costs of training recovered pursuant to paragraph (1) of  
17 subdivision (c) shall be allocated to the office to be used upon  
18 appropriation for the continuing training program pursuant to this  
19 article.

20 (2) Costs of seeking cover recovered pursuant to paragraph (2)  
21 of subdivision (c) shall be deposited in the Physician Assistant  
22 Training Fund established pursuant to Section 3537.40 for the  
23 purposes of providing grants pursuant to subdivision (c) of Section  
24 3537.35.

25 (3) Costs of enforcement recovered pursuant to paragraph (3)  
26 of subdivision (c) shall be allocated between the office, and the  
27 Attorney General, or other counsel, according to actual costs.

28 ~~SEC. 75.~~

29 *SEC. 80.* Section 3537.50 of the Business and Professions Code  
30 is amended to read:

31 3537.50. No General Fund revenues shall be expended to carry  
32 out this article. The implementation of the pilot program and, if  
33 applicable, the permanent program established by this article shall  
34 be contingent upon the availability of federal funds, which do not  
35 divert or detract from funds currently utilized to underwrite existing  
36 physician assistant training programs or to fund existing functions  
37 of the board. The new funding shall be sufficient to cover the full  
38 additional cost to the educational institution or institutions that  
39 establish the program or programs, the cost of tuition and  
40 attendance for the students in the program or programs, and any

1 additional costs, including enforcement costs, that the office or  
2 the board incurs as a result of implementing this article. Nothing  
3 in this article shall be construed as imposing any obligations upon  
4 the office, the board, or any physician assistant training program  
5 in the absence of adequate funding as described in this section.  
6 Nothing in this article shall be construed either as precluding  
7 applicants for the program established by this article from seeking  
8 state or federal scholarship funds, or state and federal loan  
9 repayment funds available to physician assistant students, or as  
10 requiring that any applicants be granted preference in the award  
11 of those funds. Nothing in this article shall be construed as  
12 impairing the autonomy of any institution that offers a physician  
13 assistant training program.

14 ~~SEC. 76.~~

15 *SEC. 81.* Section 3540 of the Business and Professions Code  
16 is amended to read:

17 3540. A physician assistants corporation is a corporation which  
18 is authorized to render professional services, as defined in Section  
19 13401 of the Corporations Code, so long as that corporation and  
20 its shareholders, officers, directors, and employees rendering  
21 professional services who are certified physician assistants are in  
22 compliance with the Moscone-Knox Professional Corporation Act,  
23 the provisions of this article, and all other statutes and regulations  
24 now or hereafter enacted or adopted pertaining to the corporation  
25 and the conduct of its affairs.

26 With respect to a physician assistants corporation, the  
27 governmental agency referred to in the Moscone-Knox Professional  
28 Corporation Act (commencing with Section 13400) of Division 3  
29 of Title 1 of the Corporations Code is the board.

30 ~~SEC. 77.~~

31 *SEC. 82.* Section 3546 of the Business and Professions Code  
32 is amended to read:

33 3546. The Medical Board of California may adopt and enforce  
34 regulations to carry out the purposes and objectives of this article,  
35 including regulations requiring (a) that the bylaws of a physician  
36 assistant corporation shall include a provision whereby the capital  
37 stock of the corporation owned by a disqualified person (as defined  
38 in Section 13401 of the Corporations Code), or a deceased person,  
39 shall be sold to the corporation or to the remaining shareholders  
40 of the corporation within the time as the regulations may provide,

1 and (b) that a physician assistant corporation shall provide adequate  
2 security by insurance or otherwise for claims against it by its  
3 patients arising out of the rendering of professional services.

4 *SEC. 83. Section 4001 of the Business and Professions Code*  
5 *is amended to read:*

6 4001. (a) There is in the Department of Consumer Affairs a  
7 California State Board of Pharmacy in which the administration  
8 and enforcement of this chapter is vested. The board consists of  
9 13 members.

10 (b) The Governor shall appoint seven competent pharmacists  
11 who reside in different parts of the state to serve as members of  
12 the board. The Governor shall appoint four public members, and  
13 the Senate Committee on Rules and the Speaker of the Assembly  
14 shall each appoint a public member who shall not be a licensee of  
15 the board, any other board under this division, or any board referred  
16 to in Section 1000 or 3600.

17 (c) At least five of the seven pharmacist appointees to the board  
18 shall be pharmacists who are actively engaged in the practice of  
19 pharmacy. Additionally, the membership of the board shall include  
20 at least one pharmacist representative from each of the following  
21 practice settings: an acute care hospital, an independent community  
22 pharmacy, a chain community pharmacy, and a long-term health  
23 care or skilled nursing facility. The pharmacist appointees shall  
24 also include a pharmacist who is a member of a labor union that  
25 represents pharmacists. For the purposes of this subdivision, a  
26 “chain community pharmacy” means a chain of 75 or more stores  
27 in California under the same ownership, and an “independent  
28 community pharmacy” means a pharmacy owned by a person or  
29 entity who owns no more than four pharmacies in California.

30 (d) Members of the board shall be appointed for a term of four  
31 years. No person shall serve as a member of the board for more  
32 than two consecutive terms. Each member shall hold office until  
33 the appointment and qualification of his or her successor or until  
34 one year shall have elapsed since the expiration of the term for  
35 which the member was appointed, whichever first occurs.  
36 Vacancies occurring shall be filled by appointment for the  
37 unexpired term.

38 (e) Each member of the board shall receive a per diem and  
39 expenses as provided in Section 103.

(f) ~~In accordance with Sections 101.1 and 473.1, this~~ This section shall remain in effect only until January 1, ~~2013~~ 2017, and as of that date is repealed, unless a later enacted statute, that is enacted before January 1, ~~2013~~ 2017, deletes or extends that date. ~~The~~ *Notwithstanding any other provision of law, the* repeal of this section renders the board subject to the review ~~required by Division 1.2 (commencing with Section 473)~~ by the appropriate policy committees of the Legislature.

*SEC. 84. Section 4003 of the Business and Professions Code is amended to read:*

4003. (a) The board, with the approval of the director, may appoint a person exempt from civil service who shall be designated as an executive officer and who shall exercise the powers and perform the duties delegated by the board and vested in him or her by this chapter. The executive officer may or may not be a member of the board as the board may determine.

(b) The executive officer shall receive the compensation as established by the board with the approval of the Director of Finance. The executive officer shall also be entitled to travel and other expenses necessary in the performance of his or her duties.

(c) The executive officer shall maintain and update in a timely fashion records containing the names, titles, qualifications, and places of business of all persons subject to this chapter.

(d) The executive officer shall give receipts for all money received by him or her and pay it to the department, taking its receipt therefor. Besides the duties required by this chapter, the executive officer shall perform other duties pertaining to the office as may be required of him or her by the board.

(e) ~~In accordance with Sections 101.1 and 473.1, this~~ This section shall remain in effect only until January 1, ~~2013~~ 2017, and as of that date is repealed, unless a later enacted statute, that is enacted before January 1, ~~2013~~ 2017, deletes or extends that date.

*SEC. 85. Section 4990 of the Business and Professions Code is amended to read:*

4990. (a) There is in the Department of Consumer Affairs, a Board of Behavioral Sciences that consists of the following members:

- (1) Two state licensed clinical social workers.
- (2) One state licensed educational psychologist.
- (3) Two state licensed marriage and family therapists.

1 (4) ~~Commencing January 1, 2012, one~~ *One* state licensed  
2 professional clinical counselor.

3 (5) Seven public members.

4 (b) Each member, except the seven public members, shall have  
5 at least two years of experience in his or her profession.

6 (c) Each member shall reside in the State of California.

7 (d) The Governor shall appoint five of the public members and  
8 the six licensed members with the advice and consent of the Senate.  
9 The Senate Committee on Rules and the Speaker of the Assembly  
10 shall each appoint a public member.

11 (e) Each member of the board shall be appointed for a term of  
12 four years. A member appointed by the Speaker of the Assembly  
13 or the Senate Committee on Rules shall hold office until the  
14 appointment and qualification of his or her successor or until one  
15 year from the expiration date of the term for which he or she was  
16 appointed, whichever first occurs. Pursuant to Section 1774 of the  
17 Government Code, a member appointed by the Governor shall  
18 hold office until the appointment and qualification of his or her  
19 successor or until 60 days from the expiration date of the term for  
20 which he or she was appointed, whichever first occurs.

21 (f) A vacancy on the board shall be filled by appointment for  
22 the unexpired term by the authority who appointed the member  
23 whose membership was vacated.

24 (g) Not later than the first of June of each calendar year, the  
25 board shall elect a chairperson and a vice chairperson from its  
26 membership.

27 (h) Each member of the board shall receive a per diem and  
28 reimbursement of expenses as provided in Section 103.

29 (i) This section shall remain in effect only until January 1, ~~2013~~  
30 *2017*, and as of that date is repealed, unless a later enacted statute,  
31 that is enacted before January 1, ~~2013~~ *2017*, deletes or extends  
32 that date.

33 (j) *Notwithstanding any other provision of law, the repeal of*  
34 *this section renders the board subject to review by the appropriate*  
35 *policy committees of the Legislature.*

36 *SEC. 86. Section 4990.04 of the Business and Professions Code*  
37 *is amended to read:*

38 4990.04. (a) The board shall appoint an executive officer. This  
39 position is designated as a confidential position and is exempt from

1 civil service under subdivision (e) of Section 4 of Article VII of  
2 the California Constitution.

3 (b) The executive officer serves at the pleasure of the board.

4 (c) The executive officer shall exercise the powers and perform  
5 the duties delegated by the board and vested in him or her by this  
6 chapter.

7 (d) With the approval of the director, the board shall fix the  
8 salary of the executive officer.

9 (e) The chairperson and executive officer may call meetings of  
10 the board and any duly appointed committee at a specified time  
11 and place. For purposes of this section, “call meetings” means  
12 setting the agenda, time, date, or place for any meeting of the board  
13 or any committee.

14 (f) This section shall remain in effect only until January 1, ~~2013~~  
15 2017, and as of that date is repealed, unless a later enacted statute,  
16 that is enacted before January 1, ~~2013~~ 2017, deletes or extends  
17 that date.

18 *SEC. 87. Section 8000 of the Business and Professions Code*  
19 *is amended to read:*

20 8000. (a) There is in the Department of Consumer Affairs a  
21 Court Reporters Board of California, which consists of five  
22 members, three of whom shall be public members and two of  
23 whom shall be holders of certificates issued under this chapter  
24 who have been actively engaged as shorthand reporters within this  
25 state for at least five years immediately preceding their  
26 appointment.

27 ~~This~~

28 (b) *This* section shall remain in effect only until January 1, ~~2013~~  
29 2017, and as of that date is repealed, unless a later enacted statute,  
30 that is enacted before January 1, ~~2013~~ 2017, deletes or extends  
31 that date.

32 (c) *Notwithstanding any other provision of law, the repeal of*  
33 *this section renders the board subject to review by the appropriate*  
34 *policy committees of the Legislature.*

35 *SEC. 88. Section 8005 of the Business and Professions Code*  
36 *is amended to read:*

37 8005. The Court Reporters Board of California is charged with  
38 the executive functions necessary for effectuating the purposes of  
39 this chapter. It may appoint committees as it deems necessary or  
40 proper. The board may appoint, prescribe the duties, and fix the

1 salary of an executive officer. Except as provided by Section 159.5,  
2 the board may also employ other employees as may be necessary,  
3 subject to civil service and other provisions of law.

4 This section shall remain in effect only until January 1, ~~2013~~  
5 2017, and as of that date is repealed, unless a later enacted statute,  
6 that is enacted before January 1, ~~2013~~ 2017, deletes or extends  
7 that date.

8 *SEC. 89. Section 8027 of the Business and Professions Code*  
9 *is amended to read:*

10 8027. (a) As used in this section, “school” means a court  
11 reporter training program or an institution that provides a course  
12 of instruction approved by the board and the Bureau for Private  
13 Postsecondary and Vocational Education, is a public school in this  
14 state, or is accredited by the Western Association of Schools and  
15 Colleges.

16 (b) A court reporting school shall be primarily organized to train  
17 students for the practice of shorthand reporting, as defined in  
18 Sections 8016 and 8017. Its educational program shall be on the  
19 postsecondary or collegiate level. It shall be legally organized and  
20 authorized to conduct its program under all applicable laws of the  
21 state, and shall conform to and offer all components of the  
22 minimum prescribed course of study established by the board. Its  
23 records shall be kept and shall be maintained in a manner to render  
24 them safe from theft, fire, or other loss. The records shall indicate  
25 positive daily and clock-hour attendance of each student for all  
26 classes, apprenticeship and graduation reports, high school  
27 transcripts or the equivalent or self-certification of high school  
28 graduation or the equivalent, transcripts of other education, and  
29 student progress to date, including all progress and counseling  
30 reports.

31 (c) Any school intending to offer a program in court reporting  
32 shall notify the board within 30 days of the date on which it  
33 provides notice to, or seeks approval from, the State Department  
34 of Education, the Bureau for Private Postsecondary and Vocational  
35 Education, the Office of the Chancellor of the California  
36 Community Colleges, or the Western Association of Schools and  
37 Colleges, whichever is applicable. The board shall review the  
38 proposed curriculum and provide the school tentative approval, or  
39 notice of denial, within 60 days of receipt of the notice. The school  
40 shall apply for provisional recognition pursuant to subdivision (d)

1 within no more than one year from the date it begins offering court  
2 reporting classes.

3 (d) The board may grant provisional recognition to a new court  
4 reporting school upon satisfactory evidence that it has met all of  
5 the provisions of subdivision (b) and this subdivision. Recognition  
6 may be granted by the board to a provisionally recognized school  
7 after it has been in continuous operation for a period of no less  
8 than three consecutive years from the date provisional recognition  
9 was granted, during which period the school shall provide  
10 satisfactory evidence that at least one person has successfully  
11 completed the entire course of study established by the board and  
12 complied with the provisions of Section 8020, and has been issued  
13 a certificate to practice shorthand reporting as defined in Sections  
14 8016 and 8017. The board may, for good cause shown, extend the  
15 three-year provisional recognition period for not more than one  
16 year. Failure to meet the provisions and terms of this section shall  
17 require the board to deny recognition. Once granted, recognition  
18 may be withdrawn by the board for failure to comply with all  
19 applicable laws and regulations.

20 (e) Application for recognition of a court reporting school shall  
21 be made upon a form prescribed by the board and shall be  
22 accompanied by all evidence, statements, or documents requested.  
23 Each branch, extension center, or off-campus facility requires  
24 separate application.

25 (f) All recognized and provisionally recognized court reporting  
26 schools shall notify the board of any change in school name,  
27 address, telephone number, responsible court reporting program  
28 manager, owner of private schools, and the effective date thereof,  
29 within 30 days of the change. All of these notifications shall be  
30 made in writing.

31 (g) A school shall notify the board in writing immediately of  
32 the discontinuance or pending discontinuance of its court reporting  
33 program or any of the program's components. Within two years  
34 of the date this notice is sent to the board, the school shall  
35 discontinue its court reporting program in its entirety. The board  
36 may, for good cause shown, grant not more than two one-year  
37 extensions of this period to a school. If a student is to be enrolled  
38 after this notice is sent to the board, a school shall disclose to the  
39 student the fact of the discontinuance or pending discontinuance  
40 of its court reporting program or any of its program components.

1 (h) The board shall maintain a roster of currently recognized  
2 and provisionally recognized court reporting schools, including,  
3 but not limited to, the name, address, telephone number, and the  
4 name of the responsible court reporting program manager of each  
5 school.

6 (i) The board shall maintain statistics that display the number  
7 and passing percentage of all first-time examinees, including, but  
8 not limited to, those qualified by each recognized or provisionally  
9 recognized school and those first-time examinees qualified by  
10 other methods as defined in Section 8020.

11 (j) Inspections and investigations shall be conducted by the  
12 board as necessary to carry out this section, including, but not  
13 limited to, unannounced site visits.

14 (k) All recognized and provisionally recognized schools shall  
15 print in their school or course catalog the name, address, and  
16 telephone number of the board. At a minimum, the information  
17 shall be in 8-point bold type and include the following statement:  
18

19 “IN ORDER FOR A PERSON TO QUALIFY FROM A  
20 SCHOOL TO TAKE THE STATE LICENSING EXAMINATION,  
21 THE PERSON SHALL COMPLETE A PROGRAM AT A  
22 RECOGNIZED SCHOOL. FOR INFORMATION CONCERNING  
23 THE MINIMUM REQUIREMENTS THAT A COURT  
24 REPORTING PROGRAM MUST MEET IN ORDER TO BE  
25 RECOGNIZED, CONTACT: THE COURT REPORTERS  
26 BOARD OF CALIFORNIA; (ADDRESS); (TELEPHONE  
27 NUMBER).”  
28

29 (l) Each court reporting school shall file with the board, not  
30 later than June 30 of each year, a current school catalog that shows  
31 all course offerings and staff, and for private schools, the owner,  
32 except that where there have been no changes to the catalog within  
33 the previous year, no catalog need be sent. In addition, each school  
34 shall also file with the board a statement certifying whether the  
35 school is in compliance with all statutes and the rules and  
36 regulations of the board, signed by the responsible court reporting  
37 program manager.

38 (m) A school offering court reporting shall not make any written  
39 or verbal claims of employment opportunities or potential earnings

1 unless those claims are based on verified data and reflect current  
2 employment conditions.

3 (n) If a school offers a course of instruction that exceeds the  
4 board's minimum requirements, the school shall disclose orally  
5 and in writing the board's minimum requirements and how the  
6 course of instruction differs from those criteria. The school shall  
7 make this disclosure before a prospective student executes an  
8 agreement obligating that person to pay any money to the school  
9 for the course of instruction. The school shall also make this  
10 disclosure to all students enrolled on January 1, 2002.

11 (o) Private and public schools shall provide each prospective  
12 student with all of the following and have the prospective student  
13 sign a document that shall become part of that individual's  
14 permanent record, acknowledging receipt of each item:

15 (1) A student consumer information brochure published by the  
16 board.

17 (2) A list of the school's graduation requirements, including the  
18 number of tests, the pass point of each test, the speed of each test,  
19 and the type of test, such as jury charge or literary.

20 (3) A list of requirements to qualify for the state-certified  
21 shorthand reporter licensing examination, including the number  
22 of tests, the pass point of each test, the speed of each test, and the  
23 type of test, such as jury charge or literary, if different than those  
24 requirements listed in paragraph (2).

25 (4) A copy of the school's board-approved benchmarks for  
26 satisfactory progress as identified in subdivision (u).

27 (5) A report showing the number of students from the school  
28 who qualified for each of the certified shorthand reporter licensing  
29 examinations within the preceding two years, the number of those  
30 students that passed each examination, the time, as of the date of  
31 qualification, that each student was enrolled in court reporting  
32 school, and the placement rate for all students that passed each  
33 examination.

34 (6) On and after January 1, 2005, the school shall also provide  
35 to prospective students the number of hours each currently enrolled  
36 student who has qualified to take the next licensing test, exclusive  
37 of transfer students, has attended court reporting classes.

38 (p) All enrolled students shall have the information in  
39 subdivisions (n) and (o) on file no later than June 30, 2005.

1 (q) Public schools shall provide the information in subdivisions  
2 (n) and (o) to each new student the first day he or she attends theory  
3 or machine speed class, if it was not provided previously.

4 (r) Each enrolled student shall be provided written notification  
5 of any change in qualification or graduation requirements that is  
6 being implemented due to the requirements of any one of the  
7 school's oversight agencies. This notice shall be provided to each  
8 affected student at least 30 days before the effective date of the  
9 change and shall state the new requirement and the name, address,  
10 and telephone number of the agency that is requiring it of the  
11 school. Each student shall initial and date a document  
12 acknowledging receipt of that information and that document, or  
13 a copy thereof, shall be made part of the student's permanent file.

14 (s) Schools shall make available a comprehensive final  
15 examination in each academic subject to any student desiring to  
16 challenge an academic class in order to obtain credit towards  
17 certification for the state licensing examination. The points required  
18 to pass a challenge examination shall not be higher than the  
19 minimum points required of other students completing the  
20 academic class.

21 (t) An individual serving as a teacher, instructor, or reader shall  
22 meet the qualifications specified by regulation for his or her  
23 position.

24 (u) Each school shall provide a substitute teacher or instructor  
25 for any class for which the teacher or instructor is absent for two  
26 consecutive days or more.

27 (v) The board has the authority to approve or disapprove  
28 benchmarks for satisfactory progress which each school shall  
29 develop for its court reporting program. Schools shall use only  
30 board-approved benchmarks to comply with the provisions of  
31 paragraph (4) of subdivision (o) and subdivision (u).

32 (w) Each school shall counsel each student a minimum of one  
33 time within each 12-month period to identify the level of attendance  
34 and progress, and the prognosis for completing the requirements  
35 to become eligible to sit for the state licensing examination. If the  
36 student has not progressed in accordance with the board-approved  
37 benchmarks for that school, the student shall be counseled a  
38 minimum of one additional time within that same 12-month period.

39 (x) The school shall provide to the board, for each student  
40 qualifying through the school as eligible to sit for the state licensing

1 examination, the number of hours the student attended court  
2 reporting classes, both academic and machine speed classes,  
3 including theory.

4 (y) The pass rate of first-time examination takers for each school  
5 offering court reporting shall meet or exceed the average pass rate  
6 of all first-time test takers for a majority of examinations given  
7 for the preceding three years. Failure to do so shall require the  
8 board to conduct a review of the program. In addition, the board  
9 may place the school on probation and may withdraw recognition  
10 if the school continues to place below the above-described standard  
11 on the two examinations that follow the three-year period.

12 (z) A school shall not require more than one 10-minute  
13 qualifying examination, as defined in the regulations of the board,  
14 for a student to be eligible to sit for the state certification  
15 examination.

16 (aa) A school shall provide the board the actual number of hours  
17 of attendance for each applicant the school qualifies for the state  
18 licensing examination.

19 (ab) The board shall, by December 1, 2001, do the following  
20 by regulation as necessary:

21 (1) Establish the format that shall be used by schools to report  
22 tracking of all attendance hours and actual timeframes for  
23 completed coursework.

24 (2) Require schools to provide a minimum of 10 hours of live  
25 dictation class each school week for every full-time student.

26 (3) Require schools to provide students with the opportunity to  
27 read back from their stenographic notes a minimum of one time  
28 each day to his or her instructor.

29 (4) Require schools to provide students with the opportunity to  
30 practice with a school-approved speed-building audio recording,  
31 or other assigned material, a minimum of one hour per day after  
32 school hours as a homework assignment and provide the notes  
33 from this audio recording to their instructor the following day for  
34 review.

35 (5) Develop standardization of policies on the use and  
36 administration of qualifier examinations by schools.

37 (6) Define qualifier examination as follows: the qualifier  
38 examination shall consist of 4-voice testimony of 10-minute  
39 duration at 200 words per minute, graded at 97.5 percent accuracy,  
40 and in accordance with the guidelines followed by the board.

1 Schools shall be required to date and number each qualifier and  
2 announce the date and number to the students at the time of  
3 administering the qualifier. All qualifiers shall indicate the actual  
4 dictation time of the test and the school shall catalog and maintain  
5 the qualifier for a period of not less than three years for the purpose  
6 of inspection by the board.

7 (7) Require schools to develop a program to provide students  
8 with the opportunity to interact with professional court reporters  
9 to provide skill support, mentoring, or counseling that they can  
10 document at least quarterly.

11 (8) Define qualifications and educational requirements required  
12 of instructors and readers that read test material and qualifiers.

13 (ac) The board shall adopt regulations to implement the  
14 requirements of this section not later than September 1, 2002.

15 (ad) The board may recover costs for any additional expenses  
16 incurred under the enactment amending this section in the 2001–02  
17 Regular Session of the Legislature pursuant to its fee authority in  
18 Section 8031.

19 *SEC. 90. Section 8030.2 of the Business and Professions Code*  
20 *is amended to read:*

21 8030.2. (a) To provide shorthand reporting services to  
22 low-income litigants in civil cases, who are unable to otherwise  
23 afford those services, funds generated by fees received by the board  
24 pursuant to subdivision (c) of Section 8031 in excess of funds  
25 needed to support the board's operating budget for the fiscal year  
26 in which a transfer described below is made shall be used by the  
27 board for the purpose of establishing and maintaining a Transcript  
28 Reimbursement Fund. The Transcript Reimbursement Fund shall  
29 be established by a transfer of funds from the Court Reporters'  
30 Fund in the amount of three hundred thousand dollars (\$300,000)  
31 at the beginning of each fiscal year. Notwithstanding any other  
32 provision of this article, a transfer to the Transcript Reimbursement  
33 Fund in excess of the fund balance established at the beginning of  
34 each fiscal year shall not be made by the board if the transfer will  
35 result in the reduction of the balance of the Court Reporters' Fund  
36 to an amount less than six months' operating budget.

37 (b) All moneys held in the Court Reporters' Fund on the  
38 effective date of this section in excess of the board's operating  
39 budget for the 1996–97 fiscal year shall be used as provided in  
40 subdivision (a).

1 (c) Refunds and unexpended funds that are anticipated to remain  
2 in the Transcript Reimbursement Fund at the end of the fiscal year  
3 shall be considered by the board in establishing the fee assessment  
4 pursuant to Section 8031 so that the assessment shall maintain the  
5 level of funding for the Transcript Reimbursement Fund, as  
6 specified in subdivision (a), in the following fiscal year.

7 (d) The Transcript Reimbursement Fund is hereby created in  
8 the State Treasury. Notwithstanding Section 13340 of the  
9 Government Code, moneys in the Transcript Reimbursement Fund  
10 are continuously appropriated for the purposes of this chapter.

11 (e) (1) Applicants, including applicants pursuant to Section  
12 8030.5, who have been reimbursed pursuant to this chapter for  
13 services provided to litigants and who are awarded court costs or  
14 attorney's fees by judgment or by settlement agreement shall refund  
15 the full amount of that reimbursement to the fund within 90 days  
16 of receipt of the award or settlement.

17 (2) An applicant pursuant to Section 8030.5 who has been  
18 reimbursed for services provided to litigants under this chapter  
19 shall refund the full amount reimbursed if a court orders the  
20 applicant's fee waiver withdrawn or denied retroactively pursuant  
21 to Section 68636 of the Government Code, within 90 days of the  
22 court's order withdrawing or denying the fee waiver.

23 (f) Subject to the limitations of this chapter, the board shall  
24 maintain the fund at a level that is sufficient to pay all qualified  
25 claims. To accomplish this objective, the board shall utilize all  
26 refunds, unexpended funds, fees, and any other moneys received  
27 by the board.

28 (g) Notwithstanding Section 16346 of the Government Code,  
29 all unencumbered funds remaining in the Transcript  
30 Reimbursement Fund as of January 1, ~~2013~~ 2017, shall be  
31 transferred to the Court Reporters' Fund.

32 (h) This section shall remain in effect only until January 1, ~~2013~~  
33 2017, and as of that date is repealed, unless a later enacted statute,  
34 that is enacted before January 1, ~~2013~~ 2017, deletes or extends  
35 that date.

36 *SEC. 91. Section 8030.5 of the Business and Professions Code*  
37 *is amended to read:*

38 8030.5. (a) Notwithstanding subdivision (e) of Section 8030.4,  
39 as used in this chapter the term "applicant" also means an indigent  
40 person, as defined in subdivision (f) of Section 8030.4, appearing

1 pro se to represent himself or herself at any stage of the case and  
2 applying to receive funds from the Transcript Reimbursement  
3 Fund established by this chapter.

4 (b) Notwithstanding Section 8030.6, total disbursements to  
5 cover the cost of providing transcripts to all applicants pursuant  
6 to this section shall not exceed thirty thousand dollars (\$30,000)  
7 annually and shall not exceed one thousand five hundred dollars  
8 (\$1,500) per case.

9 (c) The board shall provide a report to the Senate and Assembly  
10 Committees on Judiciary by March 1, 2012, that includes a  
11 summary of the expenditures and claims relating to this article,  
12 including the initial fund balance as of January 1, 2011; all funds  
13 received, including the amount of, and reason for, any refunds  
14 pursuant to subdivision (e) of Section 8030.2; all claims received,  
15 including the type of case, court involved, service for which  
16 reimbursement was sought, amount paid, and amount denied, if  
17 any, and the reason for denial; and all administrative fees. This  
18 report shall be provided using existing resources.

19 (d) The Legislature finds and declares that there are funds  
20 available for indigent pro se parties under this article only because  
21 the Transcript Reimbursement Fund has not been fully utilized in  
22 recent years by the eligible applicants for whom its use has been  
23 intended, despite the evident financial need among legal services  
24 organizations and pro bono attorneys. Accordingly, the board shall,  
25 using existing resources, undertake further efforts to publicize the  
26 availability of the Transcript Reimbursement Fund to prospective  
27 applicants, as defined in subdivision (e) of Section 8030.4, through  
28 appropriate entities serving these applicants, including the State  
29 Bar of California, the California Commission on Access to Justice,  
30 and the Legal Aid Association of California. These efforts shall  
31 be described in the report required by subdivision (c).

32 (e) This section shall remain in effect only until January 1, ~~2013~~  
33 2017, and as of that date is repealed, unless a later enacted statute  
34 that is enacted before January 1, ~~2013~~ 2017, deletes or extends  
35 that date.

36 *SEC. 92. Section 9812.5 of the Business and Professions Code*  
37 *is amended to read:*

38 9812.5. The director shall gather evidence of violations of this  
39 chapter and of any regulation established hereunder by any service  
40 contractor, whether registered or not, and by any employee, partner,

1 officer, or member of any service contractor. The director shall,  
2 on his or her own initiative, conduct spot check investigations of  
3 service contractors throughout the state on a continuous basis. This  
4 section shall remain in effect only until January 1, ~~2013~~ 2015, and  
5 as of that date is repealed, unless a later enacted statute, that is  
6 enacted before January 1, ~~2013~~ 2015, deletes or extends that date.

7 *SEC. 93. Section 9830.5 of the Business and Professions Code*  
8 *is amended to read:*

9 9830.5. Each service contractor shall pay the fee required by  
10 this chapter for each place of business operated by him or her in  
11 this state and shall register with the bureau upon forms prescribed  
12 by the director. The forms shall contain sufficient information to  
13 identify the service contractor, including name, address, retail  
14 seller's permit number, if a permit is required under the Sales and  
15 Use Tax Law (Part 1 (commencing with Section 6001) of Division  
16 2 of the Revenue and Taxation Code), a copy of the certificate of  
17 qualification as filed with the Secretary of State if the service  
18 contractor is a foreign corporation, and other identifying data to  
19 be prescribed by the bureau. If the business is to be carried on  
20 under a fictitious name, that fictitious name shall be stated. If the  
21 service contractor is a partnership, identifying data shall be stated  
22 for each partner. If the service contractor is a private company that  
23 does not file an annual report on Form 10-K with the Securities  
24 and Exchange Commission, data shall be included for each of the  
25 officers and directors of the company as well as for the individual  
26 in charge of each place of the service contractor's business in the  
27 State of California, subject to any regulations the director may  
28 adopt. If the service contractor is a publicly held corporation or a  
29 private company that files an annual report on Form 10-K with  
30 the Securities and Exchange Commission, it shall be sufficient for  
31 purposes of providing data for each of the officers and directors  
32 of the corporation or company to file with the director the most  
33 recent annual report on Form 10-K that is filed with the Securities  
34 and Exchange Commission.

35 A service contractor who does not operate a place of business  
36 in this state but who sells, issues, or administers service contracts  
37 in this state, shall hold a valid registration issued by the bureau  
38 and shall pay the registration fee required by this chapter as if he  
39 or she had a place of business in this state.

1 This section shall remain in effect only until January 1, ~~2013~~  
2 2015, and as of that date is repealed, unless a later enacted statute,  
3 that is enacted before January 1, ~~2013~~ 2015, deletes or extends  
4 that date.

5 *SEC. 94. Section 9832.5 of the Business and Professions Code*  
6 *is amended to read:*

7 9832.5. (a) Registrations issued under this chapter shall expire  
8 no more than 12 months after the issue date. The expiration date  
9 of registrations shall be set by the director in a manner to best  
10 distribute renewal procedures throughout the year.

11 (b) To renew an unexpired registration, the service contractor  
12 shall, on or before the expiration date of the registration, apply for  
13 renewal on a form prescribed by the director, and pay the renewal  
14 fee prescribed by this chapter.

15 (c) To renew an expired registration, the service contractor shall  
16 apply for renewal on a form prescribed by the director, pay the  
17 renewal fee in effect on the last regular renewal date, and pay all  
18 accrued and unpaid delinquency and renewal fees.

19 (d) Renewal is effective on the date that the application is filed,  
20 the renewal fee is paid, and all delinquency fees are paid.

21 (e) For purposes of implementing the distribution of the renewal  
22 of registrations throughout the year, the director may extend, by  
23 not more than six months, the date fixed by law for renewal of a  
24 registration, except that, in that event, any renewal fee that may  
25 be involved shall be prorated in such a manner that no person shall  
26 be required to pay a greater or lesser fee than would have been  
27 required had the change in renewal dates not occurred.

28 (f) This section shall remain in effect only until January 1, ~~2013~~  
29 2015, and as of that date is repealed, unless a later enacted statute,  
30 which is enacted before January 1, ~~2013~~ 2015, deletes or extends  
31 that date.

32 *SEC. 95. Section 9847.5 of the Business and Professions Code*  
33 *is amended to read:*

34 9847.5. Each service contractor shall maintain those records  
35 as are required by the regulations adopted to carry out the  
36 provisions of this chapter for a period of at least three years. These  
37 records shall be open for reasonable inspection by the director or  
38 other law enforcement officials.

39 This section shall remain in effect only until January 1, ~~2013~~  
40 2015, and as of that date is repealed, unless a later enacted statute,

1 that is enacted before January 1, ~~2013~~ 2015, deletes or extends  
2 that date.

3 *SEC. 96. Section 9849 of the Business and Professions Code,*  
4 *as amended by Section 49 of Chapter 354 of the Statutes of 2007,*  
5 *is amended to read:*

6 9849. The expiration of a valid registration shall not deprive  
7 the director of jurisdiction to proceed with any investigation or  
8 hearing on a cease and desist order against a service dealer or  
9 service contractor or to render a decision to suspend, revoke, or  
10 place on probation a registration.

11 This section shall remain in effect only until January 1, ~~2013~~  
12 2015, and as of that date is repealed, unless a later enacted statute,  
13 that is enacted before January 1, ~~2013~~ 2015, deletes or extends  
14 that date.

15 *SEC. 97. Section 9849 of the Business and Professions Code,*  
16 *as amended by Section 50 of Chapter 354 of the Statutes of 2007,*  
17 *is amended to read:*

18 9849. The expiration of a valid registration shall not deprive  
19 the director of jurisdiction to proceed with any investigation or  
20 hearing on a cease and desist order against a service dealer or to  
21 render a decision to suspend, revoke, or place on probation a  
22 registration.

23 This section shall become operative on January 1, ~~2013~~ 2015.

24 *SEC. 98. Section 9851 of the Business and Professions Code,*  
25 *as amended by Section 51 of Chapter 354 of the Statutes of 2007,*  
26 *is amended to read:*

27 9851. The superior court in and for the county wherein any  
28 person carries on, or attempts to carry on, business as a service  
29 dealer or service contractor in violation of the provisions of this  
30 chapter, or any regulation thereunder, shall, on application of the  
31 director, issue an injunction or other appropriate order restraining  
32 that conduct.

33 The proceedings under this section shall be governed by Chapter  
34 3 (commencing with Section 525) of Title 7 of Part 2 of the Code  
35 of Civil Procedure, except that the director shall not be required  
36 to allege facts necessary to show or tending to show lack of an  
37 adequate remedy at law or irreparable injury.

38 This section shall remain in effect only until January 1, ~~2013~~  
39 2015, and as of that date is repealed, unless a later enacted statute,

1 that is enacted before January 1, ~~2013~~ 2015, deletes or extends  
2 that date.

3 *SEC. 99. Section 9851 of the Business and Professions Code,*  
4 *as amended by Section 52 of Chapter 354 of the Statutes of 2007,*  
5 *is amended to read:*

6 9851. The superior court in and for the county wherein any  
7 person carries on, or attempts to carry on, business as a service  
8 dealer in violation of the provisions of this chapter, or any  
9 regulation thereunder, shall, on application of the director, issue  
10 an injunction or other appropriate order restraining that conduct.

11 The proceedings under this section shall be governed by Chapter  
12 3 (commencing with Section 525) of Title 7 of Part 2 of the Code  
13 of Civil Procedure, except that the director shall not be required  
14 to allege facts necessary to show or tending to show lack of an  
15 adequate remedy at law or irreparable injury.

16 This section shall become operative on January 1, ~~2013~~ 2015.

17 *SEC. 100. Section 9853 of the Business and Professions Code,*  
18 *as amended by Section 53 of Chapter 354 of the Statutes of 2007,*  
19 *is amended to read:*

20 9853. A plea or verdict of guilty or a conviction following a  
21 plea of nolo contendere made to a charge substantially related to  
22 the qualifications, functions, and duties of a service dealer or  
23 service contractor is deemed to be a conviction within the meaning  
24 of this article. The director may suspend, revoke, or place on  
25 probation a registration, or may deny registration, when the time  
26 for appeal has elapsed, or the judgment of conviction has been  
27 affirmed on appeal or when an order granting probation is made  
28 suspending the imposition of sentence, irrespective of a subsequent  
29 order under Section 1203.4 of the Penal Code, allowing that person  
30 to withdraw his or her plea of guilty and to enter a plea of not  
31 guilty, or setting aside the verdict of guilty, or dismissing the  
32 accusation, information, or indictment.

33 This section shall remain in effect only until January 1, ~~2013~~  
34 2015, and as of that date is repealed, unless a later enacted statute,  
35 that is enacted before January 1, ~~2013~~ 2015, deletes or extends  
36 that date.

37 *SEC. 101. Section 9853 of the Business and Professions Code,*  
38 *as amended by Section 54 of Chapter 354 of the Statutes of 2007,*  
39 *is amended to read:*

1 9853. A plea or verdict of guilty or a conviction following a  
2 plea of nolo contendere made to a charge substantially related to  
3 the qualifications, functions, and duties of a service dealer is  
4 deemed to be a conviction within the meaning of this article. The  
5 director may suspend, revoke, or place on probation a registration,  
6 or may deny registration, when the time for appeal has elapsed, or  
7 the judgment of conviction has been affirmed on appeal or when  
8 an order granting probation is made suspending the imposition of  
9 sentence, irrespective of a subsequent order under Section 1203.4  
10 of the Penal Code allowing that person to withdraw his or her plea  
11 of guilty and to enter a plea of not guilty, or setting aside the verdict  
12 of guilty, or dismissing the accusation, information, or indictment.

13 This section shall become operative on January 1, ~~2013~~ 2015.

14 *SEC. 102. Section 9860 of the Business and Professions Code,*  
15 *as amended by Section 58 of Chapter 354 of the Statutes of 2007,*  
16 *is amended to read:*

17 9860. The director shall establish procedures for accepting  
18 complaints from the public against any service dealer or service  
19 contractor.

20 This section shall remain in effect only until January 1, ~~2013~~  
21 2015, and as of that date is repealed, unless a later enacted statute,  
22 that is enacted before January 1, ~~2013~~ 2015, deletes or extends  
23 that date.

24 *SEC. 103. Section 9860 of the Business and Professions Code,*  
25 *as amended by Section 59 of Chapter 354 of the Statutes of 2007,*  
26 *is amended to read:*

27 9860. The director shall establish procedures for accepting  
28 complaints from the public against any service dealer.

29 This section shall become operative on January 1, ~~2013~~ 2015.

30 *SEC. 104. Section 9862.5 of the Business and Professions Code*  
31 *is amended to read:*

32 9862.5. If a complaint indicates a possible violation of this  
33 chapter or of the regulations adopted pursuant to this chapter, the  
34 director may advise the service contractor of the contents of the  
35 complaint and, if the service contractor is so advised, the director  
36 shall make a summary investigation of the facts after the service  
37 ~~dealer~~ contractor has had reasonable opportunity to reply thereto.

38 This section shall remain in effect only until January 1, ~~2013~~  
39 2015, and as of that date is repealed, unless a later enacted statute,

1 that is enacted before January 1, ~~2013~~ 2015, deletes or extends  
2 that date.

3 *SEC. 105. Section 9863 of the Business and Professions Code,*  
4 *as amended by Section 61 of Chapter 354 of the Statutes of 2007,*  
5 *is amended to read:*

6 9863. If, upon summary investigation, it appears probable to  
7 the director that a violation of this chapter, or the regulations  
8 thereunder, has occurred, the director, in his or her discretion, may  
9 suggest measures that in the director's judgment would compensate  
10 the complainant for the damages he or she has suffered as a result  
11 of the alleged violation. If the service dealer or service contractor  
12 accepts the director's suggestions and performs accordingly, the  
13 director shall give that fact due consideration in any subsequent  
14 disciplinary proceeding. If the service dealer or service contractor  
15 declines to abide by the suggestions of the director, the director  
16 may investigate further and may institute disciplinary proceedings  
17 in accordance with the provisions of this chapter.

18 This section shall remain in effect only until January 1, ~~2013~~  
19 2015, and as of that date is repealed, unless a later enacted statute,  
20 that is enacted before January 1, ~~2013~~ 2015, deletes or extends  
21 that date.

22 *SEC. 106. Section 9863 of the Business and Professions Code,*  
23 *as amended by Section 62 of Chapter 354 of the Statutes of 2007,*  
24 *is amended to read:*

25 9863. If, upon summary investigation, it appears probable to  
26 the director that a violation of this chapter, or the regulations  
27 thereunder, has occurred, the director, in his or her discretion, may  
28 suggest measures that in the director's judgment would compensate  
29 the complainant for the damages he or she has suffered as a result  
30 of the alleged violation. If the service dealer accepts the director's  
31 suggestions and performs accordingly, the director shall give that  
32 fact due consideration in any subsequent disciplinary proceeding.  
33 If the service dealer declines to abide by the suggestions of the  
34 director, the director may investigate further and may institute  
35 disciplinary proceedings in accordance with the provisions of this  
36 chapter.

37 This section shall become operative on January 1, ~~2013~~ 2015.

38 *SEC. 107. Section 9873 of the Business and Professions Code,*  
39 *as amended by Section 63 of Chapter 354 of the Statutes of 2007,*  
40 *is amended to read:*

1 9873. The fees prescribed by this chapter shall be set by the  
2 director by regulation, according to the following schedule:

3 (a) (1) The initial registration fee for an electronic repair  
4 industry service dealer or for an appliance repair industry service  
5 dealer is not more than one hundred sixty-five dollars (\$165) for  
6 each place of business in this state. The initial registration fee for  
7 a service contractor is not more than seventy-five dollars (\$75) for  
8 each place of business in this state.

9 (2) The initial registration fee for a person who engages in  
10 business as both an electronic repair industry service dealer and  
11 an appliance repair industry service dealer is not more than three  
12 hundred twenty-five dollars (\$325) for each place of business in  
13 this state. The initial registration fee for a person who is a service  
14 contractor and engages in business as either an electronic repair  
15 industry service dealer or an appliance repair industry service  
16 dealer is not more than two hundred forty dollars (\$240) for each  
17 place of business in this state.

18 (3) The initial registration fee for a person who engages in both  
19 the electronic repair industry and the appliance repair industry as  
20 a service dealer and is a service contractor is not more than four  
21 hundred dollars (\$400) for each place of business in this state.

22 (4) On or after January 1, 2000, the initial registration fee for a  
23 service contractor described in subdivision (e) of Section 12741  
24 of the Insurance Code shall be set by the director in an amount not  
25 to exceed the actual and direct costs associated with the regulation  
26 of those service contractors, but in no event more than fifty  
27 thousand dollars (\$50,000).

28 A service dealer or service contractor who does not operate a  
29 place of business in this state, but engages in the electronic repair  
30 industry, the appliance repair industry, or sells, issues, or  
31 administers service contracts in this state shall pay the registration  
32 fee specified herein as if he or she had a place of business in this  
33 state.

34 (b) (1) The annual registration renewal fee for an electronic  
35 repair industry service dealer or for an appliance repair industry  
36 service dealer is not more than one hundred sixty-five dollars  
37 (\$165) for each place of business in this state, if renewed prior to  
38 its expiration date. The annual registration renewal fee for a service  
39 contractor is seventy-five dollars (\$75) for each place of business  
40 in this state, if renewed prior to its expiration date.

(2) The annual renewal fee for a service dealer who engages in the business as both an electronic repair industry service dealer and an appliance repair industry service dealer is not more than three hundred dollars (\$300) for each place of business in this state.

(3) The annual renewal fee for a service dealer who engages in the electronic repair industry and the appliance repair industry and is a service contractor is not more than three hundred seventy-five dollars (\$375) for each place of business in this state.

(4) It is the intent of the Legislature that the amount of the annual registration renewal fee for a service contractor described in subdivision (e) of Section 12741 of the Insurance Code shall be evaluated and set by the Legislature.

A service dealer or service contractor who does not operate a place of business in this state, but who engages in the electronic repair industry, the appliance repair industry, or sells or issues service contracts in this state shall pay the registration fee specified herein as if he or she had a place of business in this state.

(c) The delinquency fee is an amount equal to 50 percent of the renewal fee for a license in effect on the date of renewal of the license, except as otherwise provided in Section 163.5.

This section shall remain in effect only until January 1, ~~2013~~ 2015, and as of that date is repealed, unless a later enacted statute, which is enacted before January 1, ~~2013~~ 2015, deletes or extends that date.

*SEC. 108. Section 9873 of the Business and Professions Code, as amended by Section 64 of Chapter 354 of the Statutes of 2007, is amended to read:*

9873. The fees prescribed by this chapter shall be set by the director by regulation, according to the following schedule:

(a) The initial registration fee for an electronic repair industry service dealer or for an appliance repair industry service dealer is not more than one hundred sixty-five dollars (\$165) for each place of business in this state. The initial registration fee for a person who engages in business as both an electronic repair industry service dealer and an appliance repair industry service dealer is not more than three hundred twenty-five dollars (\$325).

(b) The annual registration renewal fee for an electronic repair industry service dealer or for an appliance repair industry service dealer is not more than one hundred sixty-five dollars (\$165) for

1 each place of business in this state, if renewed prior to its expiration  
2 date. The annual renewal fee for a service dealer who engages in  
3 the business as both an electronic repair industry service dealer  
4 and an appliance repair industry service dealer is not more than  
5 three hundred dollars (\$300).

6 (c) The delinquency fee is an amount equal to 50 percent of the  
7 renewal fee for a license in effect on the date of renewal of the  
8 license, except as otherwise provided in Section 163.5.

9 This section shall become operative on January 1, ~~2013~~ 2015.

10 *SEC. 109. Section 12529 of the Government Code, as amended*  
11 *by Section 8 of Chapter 505 of the Statutes of 2009, is amended*  
12 *to read:*

13 12529. (a) There is in the Department of Justice the Health  
14 Quality Enforcement Section. The primary responsibility of the  
15 section is to investigate and prosecute proceedings against licensees  
16 and applicants within the jurisdiction of the Medical Board of  
17 California, the California Board of Podiatric Medicine, the Board  
18 of Psychology, or any committee under the jurisdiction of the  
19 Medical Board of California.

20 (b) The Attorney General shall appoint a Senior Assistant  
21 Attorney General of the Health Quality Enforcement Section. The  
22 Senior Assistant Attorney General of the Health Quality  
23 Enforcement Section shall be an attorney in good standing licensed  
24 to practice in the State of California, experienced in prosecutorial  
25 or administrative disciplinary proceedings and competent in the  
26 management and supervision of attorneys performing those  
27 functions.

28 (c) The Attorney General shall ensure that the Health Quality  
29 Enforcement Section is staffed with a sufficient number of  
30 experienced and able employees that are capable of handling the  
31 most complex and varied types of disciplinary actions against the  
32 licensees of the board.

33 (d) Funding for the Health Quality Enforcement Section shall  
34 be budgeted in consultation with the Attorney General from the  
35 special funds financing the operations of the Medical Board of  
36 California, the California Board of Podiatric Medicine, the Board  
37 of Psychology, and the committees under the jurisdiction of the  
38 Medical Board of California, with the intent that the expenses be  
39 proportionally shared as to services rendered.

(e) This section shall remain in effect only until January 1, ~~2013~~ 2014, and as of that date is repealed, unless a later enacted statute, that is enacted before January 1, ~~2013~~ 2014, deletes or extends that date.

*SEC. 110. Section 12529 of the Government Code, as amended by Section 9 of Chapter 505 of the Statutes of 2009, is amended to read:*

12529. (a) There is in the Department of Justice the Health Quality Enforcement Section. The primary responsibility of the section is to prosecute proceedings against licensees and applicants within the jurisdiction of the Medical Board of California, the California Board of Podiatric Medicine, the Board of Psychology, or any committee under the jurisdiction of the Medical Board of California, and to provide ongoing review of the investigative activities conducted in support of those prosecutions, as provided in subdivision (b) of Section 12529.5.

(b) The Attorney General shall appoint a Senior Assistant Attorney General of the Health Quality Enforcement Section. The Senior Assistant Attorney General of the Health Quality Enforcement Section shall be an attorney in good standing licensed to practice in the State of California, experienced in prosecutorial or administrative disciplinary proceedings and competent in the management and supervision of attorneys performing those functions.

(c) The Attorney General shall ensure that the Health Quality Enforcement Section is staffed with a sufficient number of experienced and able employees that are capable of handling the most complex and varied types of disciplinary actions against the licensees of the board.

(d) Funding for the Health Quality Enforcement Section shall be budgeted in consultation with the Attorney General from the special funds financing the operations of the Medical Board of California, the California Board of Podiatric Medicine, the Board of Psychology, and the committees under the jurisdiction of the Medical Board of California, with the intent that the expenses be proportionally shared as to services rendered.

(e) This section shall become operative January 1, ~~2013~~ 2014.

*SEC. 111. Section 12529.5 of the Government Code, as amended by Section 10 of Chapter 505 of the Statutes of 2009, is amended to read:*

1 12529.5. (a) All complaints or relevant information concerning  
2 licensees that are within the jurisdiction of the Medical Board of  
3 California, the California Board of Podiatric Medicine, or the  
4 Board of Psychology shall be made available to the Health Quality  
5 Enforcement Section.

6 (b) The Senior Assistant Attorney General of the Health Quality  
7 Enforcement Section shall assign attorneys to work on location at  
8 the intake unit of the boards described in subdivision (d) of Section  
9 12529 to assist in evaluating and screening complaints and to assist  
10 in developing uniform standards and procedures for processing  
11 complaints.

12 (c) The Senior Assistant Attorney General or his or her deputy  
13 attorneys general shall assist the boards or committees in designing  
14 and providing initial and in-service training programs for staff of  
15 the boards or committees, including, but not limited to, information  
16 collection and investigation.

17 (d) The determination to bring a disciplinary proceeding against  
18 a licensee of the boards shall be made by the executive officer of  
19 the boards or committees as appropriate in consultation with the  
20 senior assistant.

21 (e) This section shall remain in effect only until January 1, ~~2013~~  
22 2014, and as of that date is repealed, unless a later enacted statute,  
23 that is enacted before January 1, ~~2013~~ 2014, deletes or extends  
24 that date.

25 *SEC. 112. Section 12529.5 of the Government Code, as*  
26 *amended by Section 11 of Chapter 505 of the Statutes of 2009, is*  
27 *amended to read:*

28 12529.5. (a) All complaints or relevant information concerning  
29 licensees that are within the jurisdiction of the Medical Board of  
30 California, the California Board of Podiatric Medicine, or the  
31 Board of Psychology shall be made available to the Health Quality  
32 Enforcement Section.

33 (b) The Senior Assistant Attorney General of the Health Quality  
34 Enforcement Section shall assign attorneys to assist the boards in  
35 intake and investigations and to direct discipline-related  
36 prosecutions. Attorneys shall be assigned to work closely with  
37 each major intake and investigatory unit of the boards, to assist in  
38 the evaluation and screening of complaints from receipt through  
39 disposition and to assist in developing uniform standards and  
40 procedures for the handling of complaints and investigations.

1 A deputy attorney general of the Health Quality Enforcement  
2 Section shall frequently be available on location at each of the  
3 working offices at the major investigation centers of the boards,  
4 to provide consultation and related services and engage in case  
5 review with the boards' investigative, medical advisory, and intake  
6 staff. The Senior Assistant Attorney General and deputy attorneys  
7 general working at his or her direction shall consult as appropriate  
8 with the investigators of the boards, medical advisors, and  
9 executive staff in the investigation and prosecution of disciplinary  
10 cases.

11 (c) The Senior Assistant Attorney General or his or her deputy  
12 attorneys general shall assist the boards or committees in designing  
13 and providing initial and in-service training programs for staff of  
14 the boards or committees, including, but not limited to, information  
15 collection and investigation.

16 (d) The determination to bring a disciplinary proceeding against  
17 a licensee of the boards shall be made by the executive officer of  
18 the boards or committees as appropriate in consultation with the  
19 senior assistant.

20 (e) This section shall become operative January 1, ~~2013~~ 2014.

21 *SEC. 113. Section 12529.6 of the Government Code is amended*  
22 *to read:*

23 12529.6. (a) The Legislature finds and declares that the  
24 Medical Board of California, by ensuring the quality and safety  
25 of medical care, performs one of the most critical functions of state  
26 government. Because of the critical importance of the board's  
27 public health and safety function, the complexity of cases involving  
28 alleged misconduct by physicians and surgeons, and the evidentiary  
29 burden in the board's disciplinary cases, the Legislature finds and  
30 declares that using a vertical enforcement and prosecution model  
31 for those investigations is in the best interests of the people of  
32 California.

33 (b) Notwithstanding any other provision of law, as of January  
34 1, 2006, each complaint that is referred to a district office of the  
35 board for investigation shall be simultaneously and jointly assigned  
36 to an investigator and to the deputy attorney general in the Health  
37 Quality Enforcement Section responsible for prosecuting the case  
38 if the investigation results in the filing of an accusation. The joint  
39 assignment of the investigator and the deputy attorney general  
40 shall exist for the duration of the disciplinary matter. During the

1 assignment, the investigator so assigned shall, under the direction  
2 but not the supervision of the deputy attorney general, be  
3 responsible for obtaining the evidence required to permit the  
4 Attorney General to advise the board on legal matters such as  
5 whether the board should file a formal accusation, dismiss the  
6 complaint for a lack of evidence required to meet the applicable  
7 burden of proof, or take other appropriate legal action.

8 (c) The Medical Board of California, the Department of  
9 Consumer Affairs, and the Office of the Attorney General shall,  
10 if necessary, enter into an interagency agreement to implement  
11 this section.

12 (d) This section does not affect the requirements of Section  
13 12529.5 as applied to the Medical Board of California where  
14 complaints that have not been assigned to a field office for  
15 investigation are concerned.

16 (e) It is the intent of the Legislature to enhance the vertical  
17 enforcement and prosecution model as set forth in subdivision (a).  
18 The Medical Board of California shall do all of the following:

19 (1) Increase its computer capabilities and compatibilities with  
20 the Health Quality Enforcement Section in order to share case  
21 information.

22 (2) Establish and implement a plan to locate its enforcement  
23 staff and the staff of the Health Quality Enforcement Section in  
24 the same offices, as appropriate, in order to carry out the intent of  
25 the vertical enforcement and prosecution model.

26 (3) Establish and implement a plan to assist in team building  
27 between its enforcement staff and the staff of the Health Quality  
28 Enforcement Section in order to ensure a common and consistent  
29 knowledge base.

30 (f) This section shall remain in effect only until January 1, ~~2013~~  
31 ~~2014~~, and as of that date is repealed, unless a later enacted statute,  
32 that is enacted before January 1, ~~2013~~ ~~2014~~, deletes or extends  
33 that date.

34 ~~SEC. 78.~~

35 ~~SEC. 114.~~ No reimbursement is required by this act pursuant  
36 to Section 6 of Article XIII B of the California Constitution because  
37 the only costs that may be incurred by a local agency or school  
38 district will be incurred because this act creates a new crime or  
39 infraction, eliminates a crime or infraction, or changes the penalty  
40 for a crime or infraction, within the meaning of Section 17556 of

- 1 the Government Code, or changes the definition of a crime within
- 2 the meaning of Section 6 of Article XIII B of the California
- 3 Constitution.

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